2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000062627

1. Entity Name CUSTOMIZED ALUMINUM, LLC



FILED Jun 22, 2006 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

2417 LAKE TALMADGE DR DELAND, FL 32724 2417 LAKE TALMADGE DR DELAND, FL 32724



03132006No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	59-3051783

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6	Name and A	Address of Current	t Registered Agent

FUST, ROBERT S 2417 LAKE TALMADGE DR. DELAND, FL 32724

DO NOT WRITE IN THIS SPACE

The above named entity submits this statement for the purpose of cha the obligations of registered agent.	inging its registered office or registered agent, or both, II	the State of Florida. I am familiar with, and	d accept
SIGNATURE	(NOTE: Registered Agent signature required when reinstating)	! DATE	
Signature, typed or printed name of registered agent and title if applicable	[Inc.] [Indiginal of Alice and Indian Alice (Alice (Alice))	·	
Filing Fee is \$50.00 Due by May 1, 2006			

J	WANAGING WEWBENG/WANAGENG
TITLE NAME STREET ADDRESS CITY-SI-ZIP	MGR FUST, ROBERT S 2417 LAKE TALMADGE DR. DELAND, FL 32724
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MANAGING MEMBERS/MANAGERS

000000567495 06/22/06-80002-006 50.00

DO NOT WRITE IN THIS SPACE

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED MARKE OF SIGNAM

PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4-28-06 (386) 743-7295