

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000066785

FILED
Jan 13, 2005
Secretary of State

Entity Name: ADVANCED ALUMINUM CREATIONS, LLC

Current Principal Place of Business:

5830 12TH AVENUE SW
NAPLES, FL 34116 US

New Principal Place of Business:

Current Mailing Address:

5830 12TH AVENUE SW
NAPLES, FL 34116 US

New Mailing Address:

FEI Number: 75-3165435

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEGAL ZOOM NEVADA, INC.
44 W. FLAGLER ST.
SUITE 675
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

ADVANCED ALUMINUM CREATIONS
5830 12TH AVENUE SW
NAPLES, FL 34116 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STACEY PULTZ

01/13/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGRM () Delete
Name: ANDERSON, JOSEPH
Address: 5830 12TH AVENUE SW
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM () Delete
Name: PULTZ, STACEY
Address: 5830 12TH AVENUE SW
City-St-Zip: NAPLES, FL 34116 US

Title: MGRM () Delete
Name: ANDERSON, MICHAEL
Address: 5830 12TH AVENUE SW
City-St-Zip: NAPLES, FL 34116 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: STACEY PULTZ

MGRM

01/13/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date