

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90161 005 ***150.00

DOCUMENT # L69212 1. Entity Name B AND Z FRAMING, INC.			
Principal Place of Business 1966 CRANE CREEK BLVD MELBOURNE, FL 32940		Mailing Address 1966 CRANE CREEK BLVD MELBOURNE, FL 32940	
2. Principal Place of Business 6050 BARCOCK ST. Suite, Apt. #, etc. #28		3. Mailing Address 6050 BARCOCK ST. Suite, Apt. #, etc. #28	
City & State PALM BAY, FLORIDA Zip Country 32909 USA		City & State PALM BAY, FLORIDA Zip Country 32909 USA	
4. FEI Number 59-3010854		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SALVESON, RANDALL T 9555 RIVERVIEW DR MICCO, FL 32976		7. Name and Address of New Registered Agent Name RANDALL T. SALVESON Street Address (P.O. Box Number is Not Acceptable) 9567 PARKER DRIVE City MICCO State FL Zip Code 32976	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable</small>		DATE 3-7-06 <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SALVENSON, RANDALL 9555 RIVERVIEW DR MICCO, FL 32976 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P. SALVESON, RANDALL 9567 PARKER DR. MICCO, FL 32976 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT LONEY, DANE 1966 CRANE CREEK BLVD, MELBOURNE, FL 32940 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Randall T Salvesson	
Date 3-7-06		Daytime Phone # 321-394-6666	