FILE NOW: Fee after May 1, will be \$588.75 FLORIDA DEPARTMENT OF STATE LIMITED LIABILITY COMPANY Sandra B. Mortham ANNUAL REPORT 24.45° 1 AH 10: 38 Secretary of State 1997 DIVISION OF CORPORATIONS SECRETARY OF STATE ALLAHASSEE. FLORIDA Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee FILING FEE Make Check Payable To: FLORIDA DEPARTMENT OF STATE \$ 203.75 Name and Mailing Address of Limited Liability Company **DOCUMENT #**L9600000761 1a. Principal Place of Business Address DIY HOME PRODUCTS, L.C. P.O. BOX 327 P.O. BOX 327 PALM HARBOR FL 34682 ALM HARBOR FL 34682 If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a 2a. Mailing Address 3. Date Organized or Qualified | 3a. State of Formation 2. Principal Place of Business POBO 29656 US HWY 19N 07/16/1996 Suite, Apt. #, etc. 4. FEI Number Applied For #219 59-3394402 City & State Not Applicable CLEARWATER 5. Date of Last Report 6. Certificate of Status Desired st Zu Arlditismal Fee Beguired 💢 7. Name and Address of Current Registered Agent B. Name and Address of New Registered Agent TANYA. E. BALbIRNIE BRADSHAW, ROBERT D 1335 SUNSET COURT Street Address (P.O. Box Number Is Not Acceptable) HIBISCUS DR. PARPON SPRINGS FL 34689 3359 Sulte, Apt. #, etc. Zip Code 9. Pursuant to the provisions of Sections 608,416 and 608,508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Fforida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations. DATE FEB 3 1997 SIGNATURE signature required when reinstating Managing Members/Managers City, State and Zip Code 10. Title **Business Street Address** MEM BRADSHAW, ROBERT D 335 SUNSET COURT TARPON SPRINGS FL BALBIRNIE, TANAYA E 1790-US-HIGHWAY 19N #17 PALM HARBOR FL MEM 3359 Hibiscus DR 50**0002176955--**|-05/13/97--01079--019 ****212.50 ****

11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i), Florida Statutes. I further certify that the information indicated on this annual 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; and that my name appears in Block 10, or on an attachment with an address.

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ROBERT D, BRADSHAW

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

Maluki Bladsleam FEB. 3 1997

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