File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE. LIMITED LIABILITY COMPANY FLORIDA DEPARTMENT OF STATE Katherine Harris ANNUAL REPORT Secretary of State FILED 1999 DIVISION OF CORPORATIONS 99 APR 16 PM 4: 02 FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE SECRETARD OF STALL AHASSEE, FLORIDA Name and Mailing Address of Limited Liability Company DOCUMENT # L98000002350 1a. Principal Place of Business Address SEA COAST WINDOW & DOOR, LLC. 609 SIESTA KEY CIRCLE, #3412 609 SIESTA KEY CIRCLE, #3412 DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441 2. Principal Place of Business 2a. Mailing Address 3. Date Organized or Qualified 38. State of Formation 10/19/1998 4 FFI Number Suite, Apt. #, etc. Suite, Apt. #, etc Applied For City & State City & State 65-087/24/ Not Applicable 6. Certificate of Status Desired Country Country 7. Name and Address of Current Registered Agent 8. Name and Address of New Registered Agent/Office HARVAN, DAVID M ESQ. Street Address (P.O. Box Number is Not Acceptable) 40 NORTHEAST 7TH AVENUE DELRAY REACH FL 33483 Suite. 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 Florida. 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. SIGPATURE _ (Hegisteric) Age: CAccopting Appointment): (NOTE: Respective) Agent segment in period where it is the co-10. tue Managing Members/Managers **Business Street Address** City, State and Zip Code MGRM SMITH, DENNIS C 609 SIESTA KEY CIRCLE, #34 DEERFIELD BEACH FL 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. Hurther 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 justee 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.

SIGNATURE: