2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jan 09, 2006 08:00 AN DOCUMENT # M82386 **Secretary of State** SEA LEVEL CARPENTRY, INC. Mailing Address Principal Place of Business 515 AVE B **515 AVE B** MELBOURNE BEACH, FL 32951 MELBOURNE BEACH, FL 32951 CR2E034 (11/05) 01042006 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2894256 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GAGNON, PAUL M. DO NOT WRITE 510 AVENUE B MELBOURNE BEACH, FL 32951 IN THIS SPACE 3. 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. Sometime, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS DPS TILE GAGNON, PAUL M. NAME STREET ADDRESS 515 AVE B. CTTY-ST-ZIP MELBOURNE BEACH, FL U0000038D177 NAME 01/11/06-80003-010 150.00 STREET ADDRESS CITY-ST-ZP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS 121Y-51-ZP NAME STREET ADDRESS CITY-ST-ZIP RTLE NAME

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS

GLACIA ON PRINTED OR PRINTED NAME OF BROKING OFFICER OR DIRECTOR

1-4-06

321-724-800

Daytime Phone if

FILED