2005 FOR PROFIT CORPORATION **FILED ANNUAL REPORT** Feb 21, 2005 08:00 AM **DOCUMENT # M95859**

	ne OAST DOORS, INC.			Secretary of Stat		
Principal Plac	ce of Business	Mailing Address		e e e e e e e e e e e e e e e e e e e		
21S 291 LOXAHAXOJ	I NO EE, FL 33470 US	13195 21ST NO LOXAHATCHEE, FL 33470	Îs.			
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Ε	OO NOT WRITE	IN THIS SPA	CE	02172005 No Chg-P CR2E034 (10/03) 4. FEI Number Applied For Not Applicable 65-0069448 Not Applicable		
			A STANSON AND AND AND AND AND AND AND AND AND AN	5. Certificate of Status Desired S8.75 Additional Fee Required		
************	6. Name and Address of Current	Registered Agent				
13195 218	HOMAS E ST NORTH "CHEE, FL 33470			DO NOT WRITE IN THIS SPACE		
The photo of the state of the s						
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 Signature, typed or printed name of registered agent and tille it applicable (NOTE, Registered Agent signature required when renstating) DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.0	Selection Campaign Fina Trust Fund Contribution		O May Be to Fees		
10.	OFFICERS AND I	DIRECTORS				
TITLE	ORTYL, THOMAS E.	The south of the Commission of the South States and South		(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
STREET ADDRESS CUTY-ST-ZIP	13195 21ST NO LOXAHATCHEE, FL	ADVAY SHEETH (FETYL)		000000236365 002/21/05-80045-017 450.00		
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutos. I further certify that the information inclicated 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: Thomas & OFT THOMAS & ORTHL	2-17-05	561-753-3288
SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OF DIRECTOR	Date	Daytime Phone #
The second secon		•