2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000022501

WHITE ALUMINIUM FABRICATION, INC.



FILED Apr 02, 2007 08:00 AM Secretary of State

Principal Place of Business

3195 SE LIONEL TERRACE STUART, FL 34997

Mailing Address

3195 SE LIONEL TERRACE STUART, FL 34997



DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 02222007

Applied For 4. FEI Numbe 65-1003126 Not Applicable \$8.75 Additional

5. Certificate of Status Desired

Fee Required

6. Name and Address of Current Registered Agent

3195 SE LIONEL TERRACE

STUART, FL 34997

WHITE, RONALD E 3451 SE KUBIN AVE STUART, FL 34994

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP



DO NOT WRITE IN THIS SDACE

| 8. The above | named entity submits this statement for the p | ourpose of changing its registers | d office or i | | h, in the State of Florida. I am familiar with, and accept |
|---------------------------------------|--|--|-----------------|--------------------------------|--|
| | tions of registered agent. | . 333 | | 3 | |
| SIGNATURE_ | | | | | |
| | Signature, typed or printed name of registered agent and title i | f applicable (NOTE Registered | Agent signaturi | required when reinstating) | DATE |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | |
| 10. | OFFICERS AND DIRECTORS | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DP WHITE, RONALD E 3451 S.E. KUBIN AVE. STUART, FL 34994 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVT WHITE, VICTORIA P 3451 S.E. KUBIN AVE. STUART, FL 34994 | | | | 000000685363 04/03/07-20027-002 150.00 |
| TITLE NAME | VS KATZ, LAWRENCE M | | | | |

DO NOT WRITE

IN THIS SPACE

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