

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000064271

FILED  
Apr 27, 2011  
Secretary of State

**Entity Name:** ALUMINUM PRODUCTS WHOLESale, INC.

**Current Principal Place of Business:**

6963-2 BUSINESS PARK BLVD  
JACKSONVILLE, FL 32256

**New Principal Place of Business:**

**Current Mailing Address:**

6963-2 BUSINESS PARK BLVD  
JACKSONVILLE, FL 32256

**New Mailing Address:**

FEI Number: 59-3729654

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SHEPHERD, MITCH B  
6963-2 BUSINESS PARK BOULEVARD N.  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PVPS  
Name: SHEPHERD, MITCH B  
Address: 6963-2 BUSINESS PARK BOULEVARD N.  
City-St-Zip: JACKSONVILLE, FL 32256

Title: TD  
Name: SHEPHERD, MITCH B  
Address: 6963-2 BUSINESS PARK BOULEVARD N.  
City-St-Zip: JACKSONVILLE, FL 32256

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MITCH SHEPHERD

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04/27/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date