2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000010812

ORLANDO, FL 32811

City-St-Zip:

Entity Name: MA SOFFIT & SIDING SERVICES INC.

FILED Apr 27, 2004 Secretary of State

Current P	rincipal Plac	e of Business:	New Principal Place	New Principal Place of Business:	
11102	NER LAKE CI D, FL 32821	R.		207 SONOMA VALLEY CIR. ORLANDO, FL 32835	
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
207 SOMAMS VALLEY CIR ORLANDO, FL 32835				207 SONOMA VALLEY CIR ORLANDO, FL 32835	
FEI Number	: 02-0537807	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	Name and Address of New Registered Agent:	
204 ORLANDO The above	D LAKE RD. D, FL 32819 l		purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ac	gent	Date	
Election Car	mpaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DPS (SILVA, MAURI 207 SONOMA ORLANDO, FL	VALLEY CIR.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	T (BERTONCINI, 4145 WHITE F		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MAURICIO D. SILVA DP 04/27/2004