2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000032114

Entity Name: TLM CARPENTRY, INC.

FILED Aug 31, 2006 Secretary of State

| Current Principal Place of Business: New P | rincipal Place of Business: |
|--|-----------------------------|
|--|-----------------------------|

1886 CORNER VIEW LANE 3575 HEIRLOOM ROSE PLACE

ORLANDO, FL 32820 OVIEDO, FL 32766

Current Mailing Address: New Mailing Address:

1886 CORNER VIEW LANE 3575 HEIRLOOM ROSE PLACE

ORLANDO, FL 32820 OVIEDO, FL 32766

FEI Number: 02-0578371 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MARTINOV, TIM P

1886 CORNER VIEW LANE
ORLANDO, FL 32820 US

MARTINOV, TIM P

3575 HEIRLOOM ROSE PLACE
OVIEDO, FL 32766 US

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: MARTINOV TIM 08/31/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition

Name: MARTINOV, TIM Name: MARTINOV, TIM

Address: 1886 CORNER VIEW LANE Address: 3575 HEIRLOOM ROSE PLACE

City-St-Zip: ORLANDO, FL 32820 City-St-Zip: OVIEDO, FL 32766

Title: VP () Delete Title: VP (X) Change () Addition Name: NAHIRNYY, ROMAN Name: MARTINOV, LYUDMILA

Name: NAHIRNYY, ROMAN Name: MARTINOV, LYUDMILA
Address: 1886 CORNER VIEW LANE Address: 3575 HEIRLOOM ROSE PLACE

City-St-Zip: ORLANDO, FL 32820 City-St-Zip: OVIEDO, FL 32766

 Name:
 NAUMETS, ZAKHAR
 Name:

 Address:
 14168 RENSSELAER ROAD
 Address:

 City-St-Zip:
 ORLANDO, FL 32826
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: TIM MARTINOV P 08/31/2006