2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

Mar 07, 2005 08:00 AM Secretary of State DOCUMENT # P02000048595 1. Entity Name REGAL SHEET METAL, INC. Principal Place of Business _______ Mailing Address 706 A 17TH STREET CT. EAST PALMETTO FL 34221 706 A 17TH STREET CT. EAST PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) 4. FEI Number City & State City & State Applied For 72-1467713 Not Applicable Zip Country Zip Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DAIGLE, DARYL Street Address (P.O. Box Number is Not Acceptable) 706 A 17TH ST. CT. EAST PALMETTO FL 34221 Zip Code 8. The above named entity subm s 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 SIGNATURE signature required when reinslating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 THILE Delete HILE ☐ Change ☐ Addition DAIGLE, DARYL NAME NAME U00000253390 03/07/05-80032-019 150.00 706 A 17TH ST. CT. EAST STREET ADDRESS STREET ADDRESS CITY-ST-AP PALMETTO FL 34221 CHY-SI-ZIP ٧s TITLE Delete IIIte Change Addition DAIGLE, DAVID Ř NAME MANTE 706 A 17TH ST. CT. EAST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-SI-ZIP Defete THILE ☐ Change ☐ Addition TITLE NAME NAME STRELT ADDRESS STREET ADDRESS CITY-ST-ZIP ally-SI-ZiP Deiete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CitY-St-ZiP 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 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 cath; 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 attackment with an address, with all other like empowered.

FILED

941-721-3053