2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000066286

FILED Mar 10, 2006 Secretary of State

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Entity Nar	ne: ALUMINI	JM DIRECT INC.					
Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:			
	ANE NORTH 3CH, FL 3341:	2					
	,						
Current M	ailing Addres	ss:	New Maili	New Mailing Address:			
	ANE NORTH 3CH, FL 3341:	2					
FEI Number: 71-0893370		FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()		
Name and	Address of 0	Current Registered Agent:	Name and	Name and Address of New Registered Agent:			
1560 SAW 4TH FL	AND ASSOCIA GRASS COR JDERDALE, F	PORATE PKWY	2645 EXEC	GLATER AND ASSOCIATES PA 2645 EXECUTIVE PARK DRIVE WESTON, FL 33331 US			
	named entity of Florida.	submits this statement for the p	ourpose of changing i	ts registered	d office or registered agent,	or both,	
SIGNATUR	RE: MARKE	GLATER, CPA		03/10/2006			
		nic Signature of Registered Age	ent	Date			
Election Can	npaign Financin	g Trust Fund Contribution ().					
		.,					
OFFICERS	S AND DIREC	TORS:	ADDITION	IS/CHANGE	ES TO OFFICERS AND DI	RECTORS:	
Title:	,) Delete	Title:		() Change () Addition		
Name:	SONSINI, ANTI		Name:				
Address:	12144 61 LANI		Address:				
City-St-Zip:	W PALM BCH,	FL 33412	City-St-Zip:				
Title:	D () Delete	Title:	D	(X) Change () Addition		
Name:	CHROMY, TIM		Name:	CHROMY, T			
Address:	19590 NW 84		Address:		NS FOREST BLVD		
City-St-Zip:	HIALEAH, FL		City-St-Zip:		LLE, FL 32259		
Title:	D () Delete	Title:		() Change () Addition		
Name:	QUINTERO, SE		Name:		()		
Address:	9201 SW 45 T		Address:				
City-St-Zip:	MIAMI, FL 331		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: ANTHONY W SONSINI D 03/10/2006