


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P02000071549	
1. Entity Name USA SEAMLESS GUTTERS, INC.	

Principal Place of Business 1201 STRIMENOS LANE LEESBURG, FL 34748	Mailing Address 1201 STRIMENOS LANE LEESBURG, FL 34748
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03232007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 45-0481137	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent NORVELL, MICHAEL C PA 1410 EMERSON ST LEESBURG, FL 34748	DO NOT WRITE IN THIS SPACE
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00


9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P URIDEL, DOUGLAS C 1201 STRIMENOS LANE LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP POWELL, STEVE 1201 STRIMENOS LN LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP HARDAWAY, BILL 30602 ORANGE DR LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S URIDEL, LOREN 36210 SPRINGLAKE BLVD FRUITLAND PARK, FL 34731
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T URIDEL, VICTORIA 1201 STRIMENOS LN LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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05/09/07-80059-001 150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other line empowered.

SIGNATURE:  **4.23.07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #