2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: Paul F. Lopez
SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

| ANNUAL REPURT (AR) | | | | | − May 02, 2006 8:00 am | |
|---|---|-----------------------|------------------------|--|--|--|
| DOCUMENT # P02000081265 | | | | Secretary of State 05-02-2006 90218 011 ***150.00 | | |
| PAUL LOPEZ WINDOWS, INC. | | | | | 7 | |
| Principal Place | e of Business | Mailing Address | | | | |
| 1433 SOUTH KIRKMAN RD #3051 1433 SOUTH KIRKMAN RD #3 ORLANDO FL 32811 ORLANDO FL 32811 | | | RD #3051 | | | |
| Principal Place of Business 3. Mailing Address | | | • | | | |
| | Vizcaya Lake Run | | 1126 Vizcaya Lake Road | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 1st MOORE CR2E034 (10/05) | |
| City & State | | City & State | City & State | | 4. FEI Number Applied For | |
| • | Ococe, FL Ococe, FL | | | | 20-000193 Not Applicable | |
| Zip 3476 | Country | Zip - 34761 | Country | | 5. Certificate of Status Desired | |
| | 6. Name and Address of Cu | | | | 7. Name and Address of New Registered Agent | |
| Name | | | | | el Lopez | |
| LOPEZ, PAUL 1433 SOUTH KIRKMAN RD #3051 | | | | Street Address (P.O. Box Number is Not Acceptable) | | |
| ORLANDO FL 32811 | | | | 1126 Vizcaya Lake Road # 104 | | |
| | | | C | City Ocoel FL Zip Code 3476/ | | |
| 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 Pol F. Law. Signature, typed or printed name of registered opent and title if applicable (NOTE: Registered Agent signature retruined when reinstating) DATE | | | | | | |
| | | | | | | |
| After | LE:NOW!!! FEE IS \$150.0 May 1, 2006 Fee Will Be \$5 Payable to Florida Departm | 50.00 | | | 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees | |
| 10. | OFFICERS | S AND DIRECTORS | 11. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE | DP | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | LOPEZ, PAUL | | NAME | | 26 Vienna Lake Rd. #104 | |
| STREET ADDRESS CITY-ST-ZIP | 1433 SOUTH KIRKMAN RD I ORLANDO FL 32811 | #3051 | STREET AD | ZIP 0 | coce, FL 34761 | |
| TITLE NAME | VPD MCKINNEY, TRAMON | ☐ Delete | TITLE NAME | | ☐ Change ☐ Addition | |
| STREET ADDRESS | 785 S KIRKMAN RD #16 | | STREET AD | ŧ | | |
| CITY-ST-ZIP | ORLANDO FL 32811 | | CITY-ST- | ZIP | | |
| TITLE NAME | | ☐ Delete | TITLE NAME | | ☐ Change ☐ Addition | |
| STREET ADDRESS | | - | STREET AC | DORESS | • • | |
| CITY-ST-ZIP | | | CITY-ST- | ZIP | | |
| TITLE | , | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | | | NAME | DODECO | | |
| STREET ADDRESS CITY-ST-ZIP | | | STREET AL | | | |
| TITLE | | ☐ Delete | TITLE | | ☐ Change ☐ Addition | |
| NAME | | _ Doub | NAME | | — · · — | |
| STREET ADDRESS | | | STREET AL | 1 | | |
| CITY-ST-ZIP | | Flore | CITY-ST- | ZIP | ☐ Change ☐ Addition | |
| NAME | | ☐ Delete | TITLE NAME | | Change Addition | |
| STREET ADDRESS | | | STREET AL | DDRESS | | |
| CITY-ST-ZIP | | | CITY-ST- | ! | | |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 | | | | | | |
| 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 like empowered. | | | | | | |

407-617-3971

Daytime Phone #

4-23-06

Date