2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED P02000083659 Mar 26, 2004 08:00 AM Secretary of State 1. Entity Name GILMAR PLASTERING CORP. Principal Place of Business Mailing Address PO BOX 28024 PO BOX 28024 HIALEAH, FL 33012 HIALEAH, FL 33012 03222004 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 54-2072628 Not Applicable \$8.75 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent AGUILA, GILBERTO DO NOT WRITE 1691 W 68 STREET HIALEAH, FL 33012 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Election Campaign Financing \$5.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TIBLE AGUILA, GILBERTO 1691 W 68 STREET STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33014 U00000097012 03/26/04-80022-002 150.00 NAME STREET ADDRESS CITY-ST-ZiP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TIME IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS 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 attachment with an address, with all other like empowered.

URE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DOLLAR DPST MAK 22/04

TITLE NAME STREET ADDRESS

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