

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000107970

Entity Name: TEM ALUMINUM, INC.

FILED  
Jan 29, 2008  
Secretary of State

## Current Principal Place of Business:

8001 LESIA CIR  
ORLANDO, FL 32835

## New Principal Place of Business:

717 RAINFALL DRIVE  
WINTER GARDEN, FL 34787

## Current Mailing Address:

8001 LESIA CIR  
ORLANDO, FL 32835

## New Mailing Address:

717 RAINFALL DRIVE  
WINTER GARDEN, FL 34787

FEI Number: 81-0573777

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SILVA, JOSE A  
8001 LESIA CIR  
ORLANDO, FL 32835 US

## Name and Address of New Registered Agent:

SILVA, JOSE A  
717 RAINFALL DRIVE  
WINTER GARDEN, FL 34747 US

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.

SIGNATURE:

01/29/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: SILVA, JOSE A  
Address: 8001 LESIA CIR  
City-St-Zip: ORLANDO, FL 32835 US

Title: VPD ( ) Delete  
Name: CARREIROS, MARIA HELENA  
Address: 8001 LESIA CIR  
City-St-Zip: ORLANDO, FL 32835 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: SILVA, JOSE A  
Address: 717 RAINFALL DRIVE  
City-St-Zip: WINTER GARDEN, FL 34747 US

Title: VPD (X) Change ( ) Addition  
Name: CARREIROS, MARIA HELENA  
Address: 5132 WELLINGTON PARK CIRCLE E-37  
City-St-Zip: ORLANDO, FL 32839 US

I hereby certify that the information supplied with this filing does not qualify 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: JOSE A. SILVA

PD

01/29/2008

Electronic Signature of Signing Officer or Director

Date