2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130700

Entity Name: PRECISE FRAMING, INC.

FILED Apr 25, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4425 WALK IN WATER ROAD 5754 SR 542 WEST

LAKE WALES, FL 33898 US SUITE #4

WINTER HAVEN, FL 33880 US

Current Mailing Address: New Mailing Address:

5754 SR 542 WEST SUITE 4

WINTER HAVEN, FL 33880 US

FEI Number: 03-0496490 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BAXTER, H. AUSTIN
4425 WALK IN WATER ROAD
5754 SR 542 WEST
LAKE WALES, FL 33898 US
SUITE #4

WINTER HAVEN, FL 33880 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: 04/25/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: BAXTER, H. AUSTIN Name: BAXTER, H. AUSTIN

 Name:
 BAXTER, H. AUSTIN
 Name:
 BAXTER, H. AUSTIN

 Address:
 4425 WALK IN WATER ROAD
 Address:
 5754 SR 542 WEST SUITE #4

 City-St-Zip:
 LAKE WALES, FL 33898
 City-St-Zip:
 WINTER HAVEN, FL 33880

Title: VP () Delete Title: () Change () Addition

 Name:
 CERVANTES, REY
 Name:

 Address:
 36 PHILLIPS STREET, APT B
 Address:

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 MAGANA, VICTOR H
 Name:

 Address:
 318 MYRTLE AVENUE
 Address:

 City-St-Zip:
 LAKE WALES, FL 33853
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 HANCOCK, TRÍNA BAXTER
 Name:

 Address:
 8612 MARY MOSER LANE
 Address:

 City-St-Zip:
 WINTER HAVEN, FL 33880
 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: H. AUSTIN BAXTER PRES 04/25/2006