

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000014396

Entity Name: TRIMWORKS PLUS, INC.

FILED  
Jul 27, 2006  
Secretary of State

## Current Principal Place of Business:

20 POINT OF WOODS DRIVE  
PALM COAST, FL 32134

## New Principal Place of Business:

17 BRISTOL DRIVE  
PALM COAST, FL 32137

## Current Mailing Address:

20 POINT OF WOODS DRIVE  
PALM COAST, FL 32164

## New Mailing Address:

17 PRINCE PATRIC LANE  
PALM COAST, FL 32164

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ORTIZ, JOSE E JR  
20 POINT OF WOODS DRIVE  
PALM COAST, FL 32164 US

## Name and Address of New Registered Agent:

ORTIZ, JOSE E JR  
17 BRISTOL DRIVE  
PALM COAST, FL 32164 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:

07/27/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: ORTIZ JR., JOSE E MR.  
Address: 20 POINT OF WOODS DRIVE  
City-St-Zip: PALM COAST, FL 32164

Title: SECR ( ) Delete  
Name: ORTIZ, NINA O MRS.  
Address: 17 PRINCE PATRIC LANE  
City-St-Zip: PALM COAST, FL 32164

Title: VP ( ) Delete  
Name: ORTIZ, JOEL M  
Address: 9 PRINCE ANTHONY LANE  
City-St-Zip: PALM COAST, FL 32164

Title: TRES (X) Delete  
Name: ROLON, MARCOS  
Address: 27 BOXWOOD LANE  
City-St-Zip: PALM COAST, FL 32137

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: ORTIZ JR., JOSE E MR.  
Address: 17 BRISTOL DRIVE  
City-St-Zip: PALM COAST, FL 32164

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: ORTIZ, JOEL M  
Address: 27 BOXWOOD LANE  
City-St-Zip: PALM COAST, FL 32137

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: JOSE E. ORTIZ JR

PRES

07/27/2006

Electronic Signature of Signing Officer or Director

Date