2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 14, 2004
Secretary of State

DOCUMENT# P03000047850

Entity Name: B & G CUSTOM ALUMINUM INC.

Current Principal Place of Business:

7714 SW 92ND LN
GAINESVILLE, FL 32608 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 101
MICANOPY, FL 32667 US

New Mailing Address:

FEI Number: 74-3089562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, ARTHUR W JR.
403 WEST MAIN ST.
ARCHER, FL, FL 32618 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: GAMBLE, FRANK
Address: P.O. BOX 848
City-St-Zip: ARCHER, FL 32618

Title: TS ( ) Delete
Name: BOWERS, JAMES
Address: P.O. BOX 101
City-St-Zip: MICANOPY, FL 32667

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: GAMBLE, FRANK
Address: 6350 185TH TR
City-St-Zip: WILLISTON, FL 32696

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

Title: VP ( ) Change (X) Addition
Name: MOORE, GARY
Address: 7714 SW 92ND LN
City-St-Zip: GAINESVILLE, FL 32608 US

Title: VP ( ) Change (X) Addition
Name: GLOGOSKI, ANDREW
Address: P.O. BOX 101
City-St-Zip: MICANOPY, FL 32667

Title: SEC ( ) Change (X) Addition
Name: GAMBLE, DEBRA
Address: 6350 185 TR
City-St-Zip: WILLISTON, FL 32696

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JAMES BOWERS TRES 01/14/2004

Electronic Signature of Signing Officer or Director Date