

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000103565

FILED
Apr 25, 2005
Secretary of State

Entity Name: VETERAN ALUMINUM INC.

Current Principal Place of Business:

1221 SW PARMA AVE
PORT ST. LUCIE, FL 34953 US

New Principal Place of Business:

5952 NW WOLVERINE RD
PORT ST. LUCIE, FL 34986 US

Current Mailing Address:

1221 SW PARMA AVE
PORT ST. LUCIE, FL 34953 US

New Mailing Address:

5952 NW WOLVERINE RD
PORT ST. LUCIE, FL 34986 US

FEI Number: 20-0257570

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MAY, SAMUEL F III
1221 SW PARMA AVE
PORT ST. LUCIE, FL 34953 US

Name and Address of New Registered Agent:

MAY, SAMUEL F III
5952 NW WOLVERINE RD
PORT ST. LUCIE, FL 34986 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: SAM MAY III

04/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MAY, SAMUEL F III
Address: 1221 SW PARMA AVE
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: VP () Delete
Name: MAY, SAMUEL F III
Address: 1221 SW PARMA AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: TRES () Delete
Name: MAY, SAMUEL F III
Address: 1221 SW PARMA AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

Title: SEC () Delete
Name: MAY, SAMUEL F III
Address: 1221 SW PARMA AVE.
City-St-Zip: PORT ST. LUCIE, FL 34953 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MAY, SAMUEL F III
Address: 5952 NW WOLVERINE RD
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: VP (X) Change () Addition
Name: MAY, SAMUEL F III
Address: 5952 NW WOLVERINE RD
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: TRES (X) Change () Addition
Name: MAY, SAMUEL F III
Address: 5952 NW WOLVERINE RD
City-St-Zip: PORT ST. LUCIE, FL 34986 US

Title: SEC (X) Change () Addition
Name: MAY, SAMUEL F III
Address: 5952 NW WOLVERINE RD
City-St-Zip: PORT ST. LUCIE, FL 34986 US

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: SAM MAY III

PRES

04/25/2005

Electronic Signature of Signing Officer or Director

Date