2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000105217

Entity Name: FABMASTER INDUSTRIAL PRODUCTS, INC.

FILED Mar 19, 2006 Secretary of State

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

4350 N.W. 19TH AVENUE UNIT G

POMPANO BEACH, FL 33064

Current Mailing Address: New Mailing Address:

4350 N.W. 19TH AVENUE 2520 N.E. 41 STREET

UNIT G LIGHTHOUSE POINT, FL 33064 POMPANO BEACH, FL 33064

FEI Number: 02-0710914 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:

BULMAN, RICHARD D JR.

SAX KLEIN

301 YAMATO ROAD, SUITE 4150

BOCA RATON, FL 33431 US

BAYMAN, ALAN A
SHADE SYSTEMS, INC.
4150 S.W. 19 STREET
OCALA, FL 34474 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: ALAN BAYMAN 03/19/2006

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:
 BARBER, JAMES N
 Name:
 BARBER, JAMES N

 Address:
 4350 N.W. 19 AVENUE, UNIT G
 Address:
 4150 S.W. 19 STREET

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:
 OCALA, FL 34474

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

 Name:
 BAYMAN, ALAN A
 Name:
 BAYMAN, ALAN A

 Address:
 4350 N.W. 19 AVENUE, UNIT G
 Address:
 4150 S.W. 19 STREET

 City-St-Zip:
 POMPANO BEACH, FL 33064
 City-St-Zip:
 OCALA, FL 34474

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: ALAN BAYMAN VP 03/19/2006