

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90103 005 ***150.00

DOCUMENT # P03000107813 1. Entity Name CREATIVE CUSTOM ALUMINUM, INC.			
Principal Place of Business 1186 NE POLK AVE ARCADIA, FL 34266		Mailing Address 1186 NE POLK AVE ARCADIA, FL 34266	
2. Principal Place of Business 2230 E. Hwy 70 Suite, Apt. #, etc. Bldg A-2 City & State Arcadia FL Zip 34266		3. Mailing Address 2230 E. Hwy 70 Suite, Apt. #, etc. Bldg A-2 City & State Arcadia FL Zip 34266	
4. FEI Number 80-0081189		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent DOW, JERRY W 1186 NE POLK AVE ARCADIA, FL 34266		7. Name and Address of New Registered Agent Name DOW JERRY W. Street Address (P.O. Box Number is Not Acceptable) 2230 E. Hwy 70 Bldg A-2 City Arcadia FL Zip Code 34266	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE JERRY W. DOW PRESIDENT 1-17-06 <small>Signature, typed or printed name of registered agent, and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME DOW, JERRY W STREET ADDRESS 1186 NE POLK AVE CITY-ST-ZIP ARCADIA, FL 34266	<input type="checkbox"/> Delete	TITLE PD NAME DOW, JERRY W. STREET ADDRESS 2347 SE. RED BARON DR CITY-ST-ZIP ARCADIA, FL 34266	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE VTSD NAME DOW, CHRYSTAL M STREET ADDRESS 1186 NE POLK AVE CITY-ST-ZIP ARCADIA, FL 34266	<input type="checkbox"/> Delete	TITLE VTSD NAME DOW, Chrystal M. STREET ADDRESS 2347 SE. RED BARON DR CITY-ST-ZIP ARCADIA, FL 34266	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME Collins Cody E. STREET ADDRESS 2347 SE. RED BARON DR CITY-ST-ZIP ARCADIA, FL 34266	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP 	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: JERRY W. DOW <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		1/17/06 863-494-2779 <small>Date Daytime Phone #</small>	