2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000109460

Entity Name: ANDY'S ALUMINUM, INC.

FILED Feb 25, 2005 Secretary of State

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

3795 N. FRUITLOOP CIRCLE 3795 N FRUITLOOP CIRCLE KISSIMMEE, FL 34741 KISSIMMEE, FL 34741

Current Mailing Address: New Mailing Address:

3795 N. FRUITLOOP CIRCLE 3795 N FRUITLOOP CIRCLE KISSIMMEE, FL 34741 KISSIMMEE, FL 34741

FEI Number: 20-0294494 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:

GIBSON, ANDREW
3795 N. FRUITLOOP CIRCLE
KISSIMMEE, FL 34741 US
GIBSON, ANDREW
3795 N FRUITLOOP CIRCLE
KISSIMMEE, FL 34741 US
KISSIMMEE, FL 34741 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: ANDREW GIBSON 02/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 GIBSON, ANDREW
 Name:
 GIBSON, ANDREW

 Address:
 3795 FRUITLOOP CIRCLE
 Address:
 3795 N FRUITLOOP CIRCLE

City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741

Title: V () Delete Title: V (X) Change () Addition
Name: CONNOR, ANTHONY J Name: COMBS, ROBERT A

Address: 3795 FRUITLOOP CIRCLE Address: 3830 N FRUITLOOP CIRCLE City-St-Zip: KISSIMMEE, FL 34741 City-St-Zip: KISSIMMEE, FL 34741

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

Name:GIBSON, RACHAEL AName:GIBSON, RACHAEL AAddress:3795 FRUITLOOP CIRCLEAddress:3830 N FRUITLOOP CIRCLECity-St-Zip:KISSIMMEE, FL 34741City-St-Zip:KISSIMMEE, FL 34741

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: ANDREW GIBSON P 02/25/2005