2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000118243

FILED Apr 30, 2005 08:00 AM Secretary of State

1. Entity Name GRAY FL	OORING, INC.	- 				· ·	
Principal Place 2703 TULANI BRADENTON,	E AVENUE	Mailing Address 2703 TULANE AVENUE BRADENTON, FL 34207 U	S	T (mailmat til	@w/## 1/117 YSY1 S\$117 YSYS	נ נושאו לו פ אן בשלות נו ס ון	Kenda wwent is labs
				04182005 No Chg-P CR2E034 (10/03)			
D	O NOT WRITE	IN THIS SPA	CE	4. FEI Numbi 20-032			Applied For Not Applicable
				5. Certificate	of Status Desired	□ \$8.75 Fee Re	5 Additional equired
6. Name and Address of Current Registered Agent					TESTER AND CONTRACTOR		· · · · · · · · · · · · · · · · · · ·
	RRY ANE AVENUE ON, FL 34207	<u>-</u> 한 : :	DO NOT WRITE IN THIS SPACE				
8. The above the obligat	named entity submits this statement for t ions of registered agent.	he purpose of changing its register	red office or regist	ered agent, or bo	th, in the State of Flor	rida. I am familiar	with, and accept
SIGNATURE	Signature, typed or printed name of registered agent airi	i iile ii appikable (NOTE Register	ed Agent signature requi	red when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Card Trust Fund C				5.00 May Be	U00000 04/30/05-4	345055 80020-011	150.00
10.	OFFICERS AND D	IRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/S GRAY, JERRY 2703 TULANE AVENUE BRADENTON, FL 34207	· · · · · · · · · · · · · · · · · · ·			The second secon	Madell Time (1994)	
TITLE NAME STREET ADDRESS		<u></u>	The second secon	2. A grand and a second and a s	The second secon		,

TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(7), 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 of 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

TITLE NAME STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED WAME OF SIGNING OFFICER OF DIRECTOR

4-26-05

DO NOT WRITE