2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# P03000118831

Entity Name: GULF COAST SCREENING & ALUMINUM INC

Current Principal Place of Business:

3010 NORTH ORIENTE AVE
SARASOTA, FL 34235 US

New Principal Place of Business:

1927 ROLLING GREEN CIRCLE
SARASOTA, FL 34240 US

Current Mailing Address:

3010 NORTH ORIENTE AVE
SARASOTA, FL 34235 US

New Mailing Address:

1927 ROLLING GREEN CIRCLE
SARASOTA, FL 34240 US

FEI Number: 20-0328327 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEMMON, MICHAEL
3010 NORTH ORIENTE AVE
SARASOTA, FL 34235 US

Name and Address of New Registered Agent:

LEMMON, MICHAEL
1927 ROLLING GREEN CIRCLE
SARASOTA, FL 34240 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: 04/26/2005
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEMMON, MICHAEL
Address: 3010 NORTH ORIENTE AVE
City-St-Zip: SARASOTA, FL 34235 US

Title: VPD ( ) Delete
Name: LEMMON, ANGELA
Address: 3010 NORTH ORIENTE AVE
City-St-Zip: SARASOTA, FL 34235 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEMMON, MICHAEL
Address: 1927 ROLLING GREEN CIRCLE
City-St-Zip: SARASOTA, FL 34240 US

Title: VPD (X) Change ( ) Addition
Name: LEMMON, ANGELA
Address: 1927 ROLLING GREEN CIRCLE
City-St-Zip: SARASOTA, FL 34240 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: MICHAEL LEMMON PD 04/26/2005
Electronic Signature of Signing Officer or Director — Date