2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 06, 2005 08:00 AM Secretary of State **DOCUMENT # P03000126373** DKR REMODELING, INC. Mailing Address Principal Place of Business 107 BERMUDA DUNES COURT 107 BERMUDA DUNES COURT NAPLES, FL 34113 NAPLES, FL 34113 No Chg-P CR2E034 (10/03) 01082005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 75-3133981 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE RUSCH, DAVID K 107 BERMUDA DUNES COURT NAPLES, FL 34113 IN THIS SPACE 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. (NOTE, Registored Agent signature required when reinstating) DATE Signature, typed or printed name of registered agont and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE RUSCH, DAVID K NAME STREET ADDRESS 107 BERMUDA DUNES COURT CITY-ST-7/P NAPLES, FL 34113 U00000289571 04/06/05-80031-019 150.00 TITLE NAME STREET ADDRESS. CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7/P IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 arischment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS CITY-ST-ZIP

FILED