2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000129740

1. Entity Name

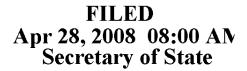
GREG MORRIS ALUMINIUM, INC.



Principal Place of Business

227 FOURTH STREET JPV WINTER HAVEN, FL 33880 Mailing Address

227 FOURTH STREET IPV WINTER HAVEN, FL 33880





DO NOT WRITE IN THIS SPACE

01172008 No Chg-P

CR2E034 (11/05)

4. FEI Number 56-2410769

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Regulred

6. Name and Address of Current Registered Agent

MORRIS, GREG 227 FOURTH STREET JPV WINTER HAVEN, FL 33880 DO NOT WRITE 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.

SIGNATURE.

10.

Signature, typed or printed name of registered agent and title if applicable

OFFICERS AND DIRECTORS

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

TITLE MORRIS, GREG NAME STREET ADDRESS 227 FOURTH STREET JPV WINTER HAVEN, FL 33880 CITY-ST-ZIP TITLE MORRIS, CANDY NAME 227 FOURTH STREET JPV STREET ADDRESS CITY-ST-ZIP WINTER HAVEN, FL 33880 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

U00000929759 -05/16/09+80044-023:150:00

DO NOT WRITE IN THIS SPACE

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:

STREET ADDRESS CITY+ST+ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4-20-08

te

Daytime Phone #