2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 05, 2007 8:00 am Secretary of State 03-05-2007 90060 050 ***150.00 **DOCUMENT # P03000131996** AMERICAN ACOUSTIC COATINGS, INC. Principal Place of Business Mailing Address 40029625 7270 THOR LANE 7270 THOR LANE PENSACOLA, FL 32526 PENSACOLA, FL 32526 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03012007 Chg-P CR2E034 (12/06) City & State City & State 4. FELNumber Applied For 20-0411562 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ARCHER, MARY JO Street Address (P.O. Box Number is Not Acceptable) 812 VIA DE LUNA PENSACOLA BEACH, FL 32561 City Zip Code 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. Signature, typed or conted name of receptured agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 GriffitH Gregg D. Delete TITLE TITLE ☐ Addition GRIFFITH, GREG D NAME NAME 7270 Thor Lane 7270 THOR LANE STREET ADDRESS STREET ADDRESS Pensacola F1 32526 CITY-ST-ZIP PENSACOLA, FL 32526 CITY-ST-ZIP PID TITLE Delete TITLE ☐ Change Addition GriffitH Diane C. 7270 ther Lane NAME NAME STREET ADDRESS STREET ADDRESS Pensacola CITY-ST-7iP CITY-ST-7/P 32526 Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE (Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-70P CHY-ST-71P ☐ Delete THILE TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

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:

FILED