2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 06, 2008 8:00 am **Secretary of State** 03-06-2008 90035 032 ***150.00

DOCUMENT # P03000134309 CRAIG VINYL & ALUMINUM INC. Principal Place of Business Mailing Address 115 60TH STREET NW 115 60TH STREET NW BRADENTON, FL 34209 BRADENTON, FL 34209 CR2E034 (11/05) No Cha-P 01162008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0459868 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CRAIG, PETER B 115 60TH STREET NW BRADENTON, FL 34209 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: Register at Agant signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution Added to Fees OFFICERS AND DIRECTORS 10. TITLE CRAIG, PETER B NAME STREET ADDRESS 115 60TH STREET NW BRADENTON, FL 34209 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CHTY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME 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 signiture 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 recuired 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:

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTOR