2008 FOR PROFIT CORPORATION ANNUAL REPORT

	ANNUAL	REPORT					
DOCU	MENT # P03000141]				
1. Entity Name THOMAS ALUMINUM ENTERPRISES, INC.				FILED Jul 17, 2008 08:00 AM Secretary of State			
P							
Principal Plac	e of Business	Mailing Address	,	1	Secreta	ny or S	late
4225 NORTH HABANA ST. 4225 NORTH HABANA ST. TAMPA, FL 33624 TAMPA, FL 33624							
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			_	07152008	No Chg-P	CR2E034 (1	11/05)
	O NOT WRITE	IN THIS SPA	CE	4. FEI Numb	er		Applied For
				57-119			Not Applicable
િલ્લાની અને કેલાં મેનું મુખ્યમ			()	5. Certificate	of Status Desired		75 Additional Required
	6. Name and Address of Current R	egistered Agent			,		
LOAYZA,	TOMAS A	7	DO:	NOT W	DITE	1	
4225 NORTH HABANA ST.				*			
TAMPA, FL 33624				IN.	THIS SP	ACE	• •
8. The above	named entity submits this statement for	the purpose of changing its register	ed office or registe	red agent, or bo	th, in the State of Flo	rida. I am famili	ar with, and accept
the obligat	ions of registered agent.						
SIGNATURE.	Signature, typed or printed name of registered agent ar	od title if applicable //NOTE: Pagistass	d Agent signature require	dubes constalues)		DATE	
	organical, 15000 or primar harm or registered again as	William II application. [1701]. Naglatare	o Agent signatore raquire	a wite i los istating;	<u> </u>	- DATE	
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008 9. Élection Campaign Finar Trust Fund Contribution.				i.00 May Be In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10.	OFFICERS AND D	DIRECTORS		•	4 % 1	4, r	·, · · · · ·
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CITY-ST-ZIP							r T
12. I hereby o	certify that the information supplied with t on this report or supplemental report is t	his filing does not qualify for the extrue and accurate and that my signal	emptions contained	d in Chapter 119). Florida Statutes. I	further certify the	at the information
oi ine car	poration or the receiver or trustee empoy or on an attachment with an address wi	vered to execute this report as requi	red by Chapter 60	7, Florida Statute	es; and that my name	appears in Bloc	k 10 or Block 11 if

SIGNATURE: MINISTER NAME OF SIGNING OFFICER OR DIRECTOR DAY 2.4 - 15/0 8

Dayling Phone Phone