


2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000144052		
1. Entity Name LALANY TRIM, INC.		

Principal Place of Business 1630 BALKIN RD #76 TALLAHASSEE, FL 32305	Mailing Address PO BOX 5954 TALLAHASSEE, FL 32314-5954
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2. Principal Place of Business 1454 Suite, Apt. #, etc. Nashville Drive City & State Tallahassee, FLA. Zip 32304 Country USA	3. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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6. Name and Address of Current Registered Agent WOOTEN, ANTONIA L 1630 BALKIN RD #76 TALLAHASSEE, FL 32305	7. Name and Address of New Registered Agent Name 1454 Street Address (P.O. Box Number is Not Acceptable) 1454 Nashville Drive City TALL FL Zip Code 32304
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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: <i>Antonia L. Wooten</i> Signature, typed or printed name of registered agent and title if applicable	DATE: 5-10-05 (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WOOTEN, ANTONIA 1630 BALKIN RD #76 TALLAHASSEE, FL 32305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400054685214 05/17/05--01062--017 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RODRIGUEZ, GABRIEL C 1630 BALKIN RD. #76 TALLAHASSEE, FL 32305 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REYNOSA, FELIPE 524 THARPE STREET #63 TALLAHASSEE, FL 323035472 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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 an other like empowered.	
SIGNATURE: <i>Antonia L. Wooten</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE: 5-10-05 Daytime Phone #

FILED

05 MAY 10 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



05092005 Chg-P CR2E034 (10/03)

4. FEI Number
APPLIED FOR 59-375097
Applied For
Not Applicable


5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

5-10-05

STATE OF FLORIDA
DIVISION OF CORPORATIONS
P.O. BOX 1500
TALLAHASSEE, FLORIDA
32302-1500

TO WHOM IT MAY CONCERN

THIS letter is a letter of STATEMENT
THAT due to moving and a change of
address I did NOT receive the NOTICE
OF ANNUAL REPORT for 2004 and the DATE
DUE at my present address I changed my
address at the post office by filling out
a change of address card however I did
NOT receive the NOTICE at my current address
for the 2004 Annual Report of LALANY TRIM INC


PATRICIA J. PROCTOR
PRESIDENT - LALANY TRIM INC
1456 NASHVILLE DRIVE
TALLAHASSEE FLORIDA
32304