2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 09, 2007 8:00 am DOCUMENT # P03000151238 Secretary of State 04-09-2007 90039 031 ***150.00 MANDOS METAL'S CORP. Principal Place of Business Mailing Address 6461 METRO PLANTATION RD FT MYERS FL 33912 6461 METRO PLANTATION RD FT MYERS FL 33912 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 56-2423526 Not Applicable 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 Name MANDOS, WILLIAM H JR Street Address (P.O. Box Number is Not Acceptable) 6461 METRO PLANTATION RD FT MYERS FL 33912 City Zip Code FL 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 (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PTD Delete TITLE TITLE Addition ☐ Change MANDOS, WILLIAM H JR NAME NAME 12250 CAISSON LANE STREET ADDRESS STREET ADDRESS FT MYERS FL 33912 CITY - ST-ZIP CITY ST ZIP VSD ☐ Delete ■ Addition WILSON, LORI NAML 12250 CAISSON LANE 11250 CAISSON LANEION RD STREET ADORESS STREET ADDRESS FT MYERS FL 33912 CITY - ST - ZIP CITY-ST-ZIP THEF TITLE ☐ Change Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY ST-ZIP Delete 11191 TITLE ☐ Change Addition NAMI NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CUTY-ST-ZIP CITY - ST - 7IP

12. I hereby certify that the information supplied with this filing dogs not qualify for the exemptions contained in Section 119. Florida Statutos. 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 eath; that I am an officer or director of the corporation or the receiver of 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 effect into empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/79/07 239-225-0775

FILED