2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000157402

A&L FRAME & TRIM, INC.



Mailing Address

Principal Place of Business 6670 297TH AVE NORTH CLEARWATER, FL 33761

6670 297TH AVE NORTH CLEARWATER, FL 33761

FILED Mar 19, 2007 08:00 A **Secretary of State**



DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) No Chg-P 03152007

Applied For 4. FEI Number 80-0102642 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

5. Name and Address of Current Registered Agent

BALDWIN, ALVIN 6670 297TH AVE NORTH CLEARWATER, FL 33761

BALDWIN, ALVIN

6670-297 AVE NORTH

CLEARWATER, FL 33761

NAME STREET ADDRESS

TITLE

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

ino obligat	iona of registered agent.						
SIGNATURE_	Signature, typed or printed name of registered agent and title	if applicable.	(NOTÉ: Registere	d Agent signaturi	e required when reinstating)	DATE	
	E NOWIII FEE IS \$150.00 ny 1, 2007 Fee will be \$550.00	l	Campaign Finand Contribution.	• —	\$5.00 May Be Added to Fees	######################################	150.00
10.	OFFICERS AND DIRECTORS						
TITLE	P						
NAME	BALDWIN, ALVIN						
STREET ADDRESS	6670-297 AVÉ. NORTH						
CITY-ST-ZIP	CLEARWATER, FL 33761					·	
TITI F	ST			1			

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

NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS

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:	alvin Baldwin'	3-1607	127-418-7999
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #