

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P04000001505

Entity Name: ANSLEY ALUMINUM CORP

FILED
Dec 21, 2005
Secretary of State

Current Principal Place of Business:

2951 SW 14TH PLACE
BOYNTON BEACH, FL 33426

New Principal Place of Business:

Current Mailing Address:

2951 SW 14TH PLACE
BOYNTON BEACH, FL 33426

New Mailing Address:

FEI Number: 65-0518507 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ANSLEY, SHARON D
2951 SW 14TH PLACE
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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.

SIGNATURE: SHARON D ANSLEY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ANSLEY, WILLIE
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: V () Delete
Name: ANSLEY, SHARON D
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: S () Delete
Name: ANSLEY, ZIPPORAH L
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: T () Delete
Name: ANSLEY, TIFFANY K
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: GIONFRIDDO, GARY V
Address: 3756 NW 8 STREET
City-St-Zip: DELRAY BEACH, FL 33445

Title: S (X) Change () Addition
Name: ANSLEY, SHARON D
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

Title: T (X) Change () Addition
Name: ANSLEY, SHARON D
Address: 5265 STEVENS RD
City-St-Zip: BOYNTON BEACH, FL 33437

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY V GIONFRIDDO

VP

12/21/2005

Electronic Signature of Signing Officer or Director

Date