2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2007 8:00 am Secretary of State DOCUMENT # P0400008886 04-24-2007 90011 005 ***158.75 CONSTRUCTION FRAMING ASSOCIATES INC Principal Place of Business Mailing Address 2507 NEWBERRY ST 2507 NEWBERRY ST ORLANDO, FL 32806 ORLANDO, FL 32806 incipal Place of Business - No P.O. Box 051 Chinaber 04132007 CR2E034 (12/06) Chg-P Applied For 4. FEI Number 20-0590039 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent CUSTODIO, ROBERT J Street Address (P.O. Box Number is Not Acceptable) 2507 NEWBERRY ST ORLANDO, FL. 32806 8. The above named entity submits this statement for the purpose of changing its registered office SIGNATURE (NOTE: F DATE 9, Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Delete TITLE TITLE ☐ Addition ESPINALES, ALEX NAME NAME STREET ADDRESS 2507 NEWBERRY STREET STREET ADDRESS ORLANDO, FL 32806 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME CUSTODIO, ROBERT J NAME 2507 NEWBERRY STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ORLANDO, FL 32806 CITY-ST-ZIP TITLE TITLE Change ☐ Addition RAMSDELL, TODD NAME NAME STREET ADDRESS 2507 NEWBERRY ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32806 ☐ Delete ☐ Addition TITLE TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete tmr ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Oelete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 applicacy, with all other like empowered.

FILED