


# 2005 FOR PROFIT CORPORATION REINSTATEMENT

APPROVED  
AND  
FILED

06 SEP -1 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P04000014580	
1. Entity Name INDUSTRIAL SHEET METAL, INC.	

Principal Place of Business 2141 BLOUNT ROAD POMPANO BEACH, FL 33069	Mailing Address 2141 BLOUNT ROAD POMPANO BEACH, FL 33069
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2. Principal Place of Business <del>2901 1st St</del> Suite, Apt. #, etc.	3. Mailing Address 2141 Blount Rd Suite, Apt. #, etc.
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City & State Pompano Beach	City & State Pompano Beach
Zip 33069	Country Broward
Zip 33069	Country Broward



10132005 REIN-P CR2E098 (6/04)

4. FEI Number 20 0611475	Applied For Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MURTON, EDWARD SR. 2141 BLOUNT ROAD POMPANO BEACH, FL 33069	
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7. Name and Address of New Registered Agent Name: <del>Michael J Scardina</del> Street Address (P.O. Box Number is Not Acceptable) City: <del>Pompano Beach</del> FL Zip Code	
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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: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

FILE NOW!!! FEE IS \$750.00 After January 1, 2006, Fee will be \$900.00	
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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 MURTON, EDWARD SR. 2141 BLOUNT ROAD POMPANO BEACH, FL 33069 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <del>Michael J Scardina</del> 2141 Blount Rd Pompano Beach Fla 33069 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MURTON, EDWARD G JR. 2141 BLOUNT ROAD POMPANO BEACH, FL 33069 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Edward Murton SR. 2141 Blount Rd Pompano Beach Fla 33069 <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	600079510016 09/06/06--01019--018 ***908.75 <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 all other like empowered.

SIGNATURE: Michael J Scardina 5-31-06 954 868-8140  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Edward G Murton Sr Date: 8-27-06 Daytime Phone #: 954 971-8509