2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000025712

Entity Name: PANASTEEL BUILDING SOLUTIONS INC.

FILED Jul 14, 2007 Secretary of State

Current Pri	Current Principal Place of Business:			New Principal Place of Business:		
7989 SW JACK JAMES DRIVE STUART, FL 34997				NTERPRISE DRIVE LUCIE, FL 34986	US	
Current Ma	Current Mailing Address:			New Mailing Address:		
	989 SW JACK JAMES DRIVE STUART, FL 34997			686 NW ENTERPRISE DRIVE PORT ST. LUCIE, FL 34986 US		
FEI Number: 2	20-0824216	FEI Number Applied For ()	El Number Not Appli	cable () Certifi	cate of Status Desired (X)	
Name and	Address of	Current Registered Agent:	Name and	Address of New Re	egistered Agent:	
BERRIOS, I 7989 SW JA STUART, F	ACK JAMES	DRIVE US		EDWIN NTERPRISE DRIVE LUCIE, FL 34986	US	
The above r in the State		submits this statement for the purpo	ose of changing it	s registered office or	registered agent, or both,	
SIGNATUR	E: EDWIN I	BERRIOS			07/14/2007	
	Electro	nic Signature of Registered Agent			Date	
		93(2)(b), F.S., the corporation did not rec	eive the prior notice	э.		
	Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	BERRIOS, ED	K JAMES DRIVE	Title: Name: Address: City-St-Zip:	DIR (X) Change BERRIOS, EDWIN 686 NW ENTERPRISE PORT ST. LUCIE, FL 3		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	DIR () Change BERRIOS, ROSSANA 686 NW ENTERPRISE PORT ST. LUCIE, FL 3		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	CEO () Change BERRIOS, EDWIN 686 NW ENTERPRISE PORT ST. LUCIE, FL 3		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	T () Change BERRIOS, EDWIN 686 NW ENTERPRISE PORT ST. LUCIE, FL 3		
Title: Name: Address: City-St-Zip:	() Delete	Title: Name: Address: City-St-Zip:	S () Change BERRIOS, ROSSANA 686 NW ENTERPRISE PORT ST. LUCIE, FL 3		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: EDWIN BERRIOS CEO 07/14/2007	
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