2008 FOR PROFIT CORPORATION

Apr 21, 2008 08:00 Al Secretary of State **ANNUAL REPORT** DOCUMENT # P04000105771 1. Entity Name A TEAM FRAMING, INC. Principal Place of Business Mailing Address 539 SANDY LANE 539 SANDY LANE PANAMA CITY BEACH, FL 32413 PANAMA CITY BEACH, FL 32413 03112008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1292420 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent OSHEA, BRUCE DO NOT WRITE 539 SANDY LANE PANAMA CITY BEACH, FL 32413 IN THIS SPACE 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: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 05/07/08-80025-014 150.00 TITLE NAME OSHEA, BRUCE STREET ADDRESS 539 SANDY LANE CITY-ST-ZIP PANAMA CITY BEACH, FL 32413 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-S1-ZIP TITLE IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-S1-ZIP DILE STREET ADDRESS CITY-ST-7/P

I hereby certify that the information supplied with this filling 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 greecute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter (the empowered) or or an attachment with an address with all other life empowered. changed, or on an attachment with an address, with all oth like empowered.

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NING OFFICER OR DIRECTOR

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