2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-7IP

SIGNATURE:

Feb 26, 2007 8:00 am Secretary of State **DOCUMENT # P04000116189** 02-26-2007 90049 033 ***150.00 1. Entity Name TRIM TEAM INC. Principal Place of Business Mailing Address 40023442 525 EAST IRIS DRIVE **525 EAST IRIS DRIVE** ORANGE CITY, FL 32763 ORANGE CITY, FL 32763 01162007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1470990 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MCNICOL, STEVEN E DO NOT WRITE 525 EAST IRIS DRIVE ORANGE CITY, FL 32763 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. 1-1107. SIGNATURE (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS P.S TITLE MCNICOL, STEVEN E NAME STREET ADDRESS 525 EAST IRIS DR CITY-ST-ZIP ORANGE CITY, FL 32763 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby 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

FILED