

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000120023

FILED  
Apr 07, 2005  
Secretary of State

Entity Name: AAA ALUMINUM & SCREENING, INC.

## Current Principal Place of Business:

221 COMMERCIAL COURT  
EAST INDUSTRIAL PARK  
SEBRING, FL 33876

## New Principal Place of Business:

## Current Mailing Address:

211 PELICAN AVENUE  
SEBRING, FL 33872

## New Mailing Address:

FEI Number: 20-1505391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DOREECE, HARP  
1601 BELVEDERE ROAD  
SUITE 402-SOUTH  
WEST PALM BEACH, FL 33406 US

## Name and Address of New Registered Agent:

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: CHAPMAN, ROBERT B JR.  
Address: 211 PELICAN AVENUE  
City-St-Zip: SEBRING, FL 33872

Title: VP (X) Delete  
Name: HARP, DOREECE E  
Address: 1601 BELVEDERE ROAD - SUITE 402-SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33406

Title: SEC (X) Delete  
Name: HARP, DOREECE E  
Address: 1601 BELVEDERE ROAD, SUITE 402-SOUTH  
City-St-Zip: WEST PALM BEACH, FL 33406

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBERT CHAPMAN

P

04/07/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date