

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000158688

FILED  
Jan 26, 2006  
Secretary of State

Entity Name: BRIX AND STIX FRAMING, INC

## Current Principal Place of Business:

2392 NW 102 BLVD.  
WILDWOOD, FL 34785

## New Principal Place of Business:

2393 NW 102 BLVD.  
WILDWOOD, FL 34785

## Current Mailing Address:

2392 NW 102 BLVD.  
WILDWOOD, FL 34785

## New Mailing Address:

2393 NW 102 BLVD.  
WILDWOOD, FL 34785

FEI Number: 20-1862621

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, JUSTINE  
2392 NW 102 BLVD.  
WILDWOOD, FL 34785 US

## Name and Address of New Registered Agent:

WILLIAMS, JUSTINE  
2393 NW 102 BLVD.  
WILDWOOD, FL 34785 US

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:

01/26/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: WILLIAMS, SEAN  
Address: 2392 NW 102 BLVD.  
City-St-Zip: WILDWOOD, FL 34785

Title: VD ( ) Delete  
Name: WILLIAMS, JUSTINE  
Address: 2392 NW 102 BLVD.  
City-St-Zip: WILDWOOD, FL 34785

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: WILLIAMS, SEAN  
Address: 2393 NW 102 BLVD.  
City-St-Zip: WILDWOOD, FL 34785

Title: VP (X) Change ( ) Addition  
Name: WILLIAMS, JUSTINE  
Address: 2393 NW 102 BLVD.  
City-St-Zip: WILDWOOD, FL 34785

I hereby certify that the information supplied with this filing does not qualify for the 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: JUSTINE WILLIAMS

VP

01/26/2006

Electronic Signature of Signing Officer or Director

Date