2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: .

Apr 13, 2006 08:00 AM Secretary of State DOCUMENT # P04000158788 T.P.L. MANUFACTURING, INC. Mailing Address Principal Place of Business 461 NE 27 ST 461 NE 27 ST POMPANO BEACH, FL 33064 POMPANO BEACH, FL 33064 01092006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1710768 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LYRAS, KOULE DO NOT WRITE 8854 PINION DRIVE LAKE WORTH, FL 33467 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 eccept the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Bø 9. Election Campaian Financino FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE LYRAS, KOULE HAME STREET ADDRESS 8854 PINION DRIVE CITY-ST-ZIP LAKE WORTH, FL 33467 TUTLE 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-TIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. 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 eath; 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 changed, or on an attachment with an address, with all other like empowered.

FILED

954-783-3400