## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Jan 25, 2006 8:00 am Secretary of State 01-25-2006 90025 005 \*\*\*150.00

DOCUMENT # P05000025628  1. Entity Name FLORIDA DOCK & DOOR COMPANY						01-25-2006 9	00025 00:	5 ***150.	00
Principal Place of Business 90 NW 110TH TERR PLANTATION, FL 33324 US		Mailing Address 90 NW 110TH TERR PLANTATION, FL 33324 US							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01172006	Chg-P	CR2E0	34 (11/05)	
City & State		City & State			4. FEI Number 20-2	34994	7	<del></del>	plied For t Applicable
` Zip	Country	Zip	Coun	try	5. Certificate of	f Status Desired		\$8.75 Add Fee Required	
	6. Name and Address of Curren	t Registered Agent			7. Name and /	uddress of New R	egistered /	lgent	
, ADSMOND, ROSEMARIE K				Name					
90 NW 110TH TERR PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable)					
	·			City				Zip Code	
•				]			FL		
8. The above named entity sufforms 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  Signature, typed or printed name of registered agent and site if applicable. (NOTE: Registered Agent algorithms required when reinstating)  DATE									
FILE NOWITH FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.									
10.	OFFICERS ANI		11.		ADDITIONS/C	HANGES TO OFF	ICERS AND		
TITLE	P ADSMOND, ROSEMARIE	Delete	TITL.	ı				☐ Change	☐ Addition
STREET ADDRESS	90 NW 110TH TERR		1	ET ADORESS					
CITY-ST-ZEP	PLANTATION, FL 33324		CITY	-ST-ZIP					
TITLE	D	☐ Delete	m					Change	Addition
NAME	ADSMOND, MICHAEL		KAN	- 1					
STREET ADDRESS CITY-ST-ZIP	90 NW 110TH TERR			ET ADDRESS -ST-ZIP					
TITLE	PLANTATION, FL 33324	Delete	חות	<del></del>			<del></del>	Change	☐ Addition
NAME			NAM	• }				C creation	
STREET ADDRESS			STR	ET ADDRESS					,
CITY-ST-ZIP			CITY	-ST-29P					
TITLE		Delete	THI.	ŀ				☐ Change	Addition
NAME STREET ADDRESS			NAM Stri	ET ADDRESS					
CITY-ST-ZIP			an	-ST-ZIP				•	
TITLE		☐ Defete	MI.	E				Change	Addition
NAME			NAM	1					
STREET ADDRESS CITY-ST-28P				ET ADDRESS '-ST-ZIP					ı
mue			ım	<del></del>				Change	☐ Addition
NAME			NAM						
STREET ADDRESS				EET ADORESS					
CITY-ST-ZIP	certify that the information supplied w	th this films does not availe.		-ST-ZP	d in Chapter 110	Florida Statutas 1	futher cert	ify that the	nformation
indicated	Lon this report or supplemental report	is this and assumes and that	_, _,, o	turn chall have the	come lend effect	es if mede under	neth: that I s	en officer	or director

12. Thereby 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 repetiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter, or on an attachment with an addissa, with all other like empowered.

SIGNATURE: VIAMO R. AKMONO

1/18/06 (954)414-0988