

FILED
Aug 28, 2006 8:00 am
Secretary of State

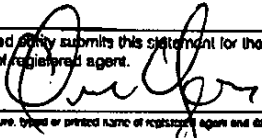
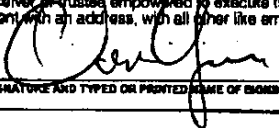
08-28-2006 90001 028 ***150.00

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

50026423



08172006 Chg-P CR2E034 (11/05)

DOCUMENT # P05000089617			
1. Entity Name YODER ALUMINUM INC.			
Principal Place of Business 15505 LEMON FISH DRIVE BRADENTON, FL 34202		Mailing Address 15505 LEMON FISH DRIVE BRADENTON, FL 34202	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 06-1750525		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent YODER, DUSTIN 3131 MOHAWK STREET SARASOTA, FL 34231		7. Name and Address of New Registered Agent Name YODER, DUSTIN Street Address (P.O. Box Number is Not Acceptable) 15505 LEMON FISH DRIVE City BRADENTON FL Zip Code 34202	
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.			
SIGNATURE:  President		DATE: 8-15-06	
Signature, typed or printed name of registered agent and date if applicable.		(NOTE: Registered Agent signature required when resigning)	
FILE NOW!!! FEE IS \$150.00 Due by September 6, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD YODER, DUSTIN 3131 MOHAWK STREET SARASOTA, FL 34231 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD YODER, DUSTIN 15505 LEMON FISH DRIVE BRADENTON FL 34202 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
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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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: 		DUSTIN LODER X 8-15-06 X 941 650-9790	
SIGNATURE AND TYPED OR PRINTED NAME OF BOARDING OFFICER OR DIRECTOR		Date Daytime Phone #	