2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000096211

FILED Jan 24, 2006 Secretary of State

Entity Name: CYCLONE ALUMINUM & SCREEN SERVICE, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	NGE AVENUE RCE, FL 3494			
Current Mailing Address:		New Mailing Address:		
	NGE AVENUE RCE, FL 3494			
FEI Number	: 20-3145724	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)
Name and	d Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
3617 ORA	SHOT, LAURIE			
-ORT PIE	RCE, FL 3494	7 US		
The above	,		ourpose of changing its registere	d office or registered agent, or both,
The above	e named entity s e of Florida. RE:	submits this statement for the p		ed office or registered agent, or both,
The above in the Stat	e named entity s e of Florida. RE:			ed office or registered agent, or both, Date
The above n the Stat SIGNATU	e named entity s e of Florida. RE: Electron	submits this statement for the p		
The above in the Stat SIGNATU Election Ca	e named entity s e of Florida. RE: Electron	submits this statement for the particle in the	ent	
The above n the Stat SIGNATU Election Ca	e named entity se of Florida. RE: Electron mpaign Financing S AND DIREC	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete LAURIE J AVENUE	ent	Date
The above n the Stat SIGNATU Election Ca OFFICER Title: Name: Address:	e named entity se of Florida. RE: Electron mpaign Financing S AND DIRECT PD () HENDERSHOT, 3617 ORANGE, FORT PIERCE,	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete LAURIE J AVENUE FL 34947 Delete AVENUE	ent ADDITIONS/CHANG Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: LAURIE J. HENDERSHOT PD 01/24/2006