

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100792

Entity Name: DJS FRAMING, INC.

FILED  
Apr 30, 2007  
Secretary of State

## Current Principal Place of Business:

845 GRISSOM ROAD NW  
LAKE PLACID, FL 33852

## New Principal Place of Business:

1590 20TH AVE SW  
VERO BEACH, FL 32962

## Current Mailing Address:

845 GRISSOM ROAD NW  
LAKE PLACID, FL 33852

## New Mailing Address:

1590 20TH AVE SW  
VERO BEACH, FL 32962

FEI Number: 20-5380813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KITTENDORF, SHANE  
845 GRISSOM ROAD NW  
LAKE PLACID, FL 33852 US

## Name and Address of New Registered Agent:

KITTENDORF, JASON  
1590 20TH AVE SW  
VERO BEACH, FL 32962 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: JASON KITTENDORF

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete  
Name: KITTENDORF, SHANE  
Address: 845 GRISSOM ROAD NW  
City-St-Zip: LAKE PLACID, FL 33852

Title: VP ( ) Delete  
Name: KITTENDORF, JASON  
Address: 106 LOQUAT RD NE  
City-St-Zip: LAKE PLACID, FL 33852

Title: VP (X) Delete  
Name: LEBOEOF, DAMON  
Address: 628 CATFISH CREEK RD  
City-St-Zip: LAKE PLACID, FL 33852

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition  
Name: KITTENDORF, JASON  
Address: 1590 20TH AVE SW  
City-St-Zip: VERO BEACH, FL 32962

Title: VP (X) Change ( ) Addition  
Name: KITTENDORF, SHANE  
Address: 845 GRISSOM ROAD NW  
City-St-Zip: LAKE PLACID, FL 33852

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JASON KITTENDORF

PSTD

04/30/2007

Electronic Signature of Signing Officer or Director

Date