

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104065

FILED  
Aug 10, 2009  
Secretary of State

**Entity Name:** AFFORDABLE CUSTOM METAL WORKS INC

**Current Principal Place of Business:**

10213 CARRIAGE GLEN CT  
TAMPA, FL 33615 US

**New Principal Place of Business:**

1717 EAST BUSCH BOULEVARD  
1110  
TAMPA, FL 33612 US

**Current Mailing Address:**

10213 CARRIAGE GLEN CT  
TAMPA, FL 33615 US

**New Mailing Address:**

FEI Number: 20-5354931      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RAJROOP, RAVI M  
10213 CARRIAGE GLEN CT  
TAMPA, FL 33615 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PDS ( ) Delete  
Name: RAJROOP, RAVI M  
Address: 10213 CARRIAGE GLEN CT  
City-St-Zip: TAMPA, FL 33615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: RAVI M. RAJROOP

PDS

08/10/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date