2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 12, 2007 8:00 am Secretary of State

1. Entity Nam	MENT # P06000132 DITIONING DUCT MASTER				04-12-2007	90042 017 ***1.	50.00	
Principal Plac	e of Business	Mailing Address		-		1		
·		•			10028210	•		
		5465 NW 190 ST Opa Locka, Fl. 33055 US		' '	• -			
OFA LUCKA,	rt 33033 - 03	OFA LOCKA, FL 33033	03					
					LENG BAN ADIN EBIN BEIR			
2. Principal P	Place of Business - No P.O. Box #	3. Mailing Address						
				1 SERTIONS III ODIZB OSSII BRITI ADISE DUCEL LIKON IIIIN 12811 ANINE INIIN NOLINNI II IKNI				
Suite, Apt. #, etc		Suite, Apt. #, etc.		04032007	Chg-P	CR2E034 (12/06)		
				04032001		CIN2E004 (12/00)		
City & Stat	е	City & State		4. FEI Number	2///120		oplied For	
				20-5	744139	No	t Applicable	
Zip	Country	Zip	Country	5. Certificate of	of Status Desired	□ \$8.75 Add		
			·			Fee Require	d	
	6. Name and Address of Current	Registered Agent	Nama	7. Name and	Address of New Re	gistered Agent		
GALLO JAIME E			ivame	Name				
GALLO, JAIME E 5465 NW 190 ST			Street Addres	Street Address (P.O. Box Number is Not Acceptable)				
	KA, FL 33055							
	,							
	r		City			Zip Cod	e	
						FL Zip Cod		
	enamed entify.skibye. s this statement fo wy's of registerald agent 		: Registered Agent signature requ		i, in the State of Flori	DATE	and accept	
1								
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.	9. Election Campaig Trust Fund Contr		5.00 May Be dded to Fees				
		OO Trust Fund Contr		dded to Fees	CHANGES TO OFFIC	CERS AND DIRECTOR	S iN 11	
After M	ay 1, 2007 Fee will be \$550.	OO Trust Fund Contr	ibution. 🔲 A	dded to Fees	CHANGES TO OFFIC	CERS AND DIRECTOR	S IN 11	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND	OO Trust Fund Contr	ibution. A	dded to Fees	CHANGES TO OFFIC			
After Ma	officers and P GALLO, JAIME E 5465 NW 190 ST	OO Trust Fund Contr	ibution. A	dded to Fees	CHANGES TO OFFIC			
After Ma	officers and P GALLO, JAIME E	OO Trust Fund Contr	ibution. A	dded to Fees	CHANGES TO OFFIC			
After Ma	officers and P GALLO, JAIME E 5465 NW 190 ST	OO Trust Fund Contr	Toution. A	dded to Fees	CHANGES TO OFFIC			
After Ma	OFFICERS AND OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055	Trust Fund Contr	TILE NAME SIREET ADDRESS CITY-ST ZIP	dded to Fees	CHANGES TO OFFIC	☐ Change	Addition	
After Ma	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE	dded to Fees	CHANGES TO OFFIC	☐ Change	Addition	
After Ma	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME	dded to Fees	CHANGES TO OFFIC	☐ Change	Addition	
After Ma	94 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST	Trust Fund Contr	TITLE NAME SIRLET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS	dded to Fees	CHANGES TO OFFIC	☐ Change	Addition	
After Ma	94 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST	Trust Fund Contr	TITLE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	☐ Change	☐ Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	dded to Fees	CHANGES TO OFFIC	☐ Change	☐ Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	dded to Fees	CHANGES TO OFFIC	☐ Change	☐ Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	☐ Change	☐ Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TILE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	☐ Change☐ Cha	Addition Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	dded to Fees	CHANGES TO OFFIC	☐ Change☐ Cha	Addition Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	dded to Fees	CHANGES TO OFFIC	☐ Change☐ Cha	Addition Addition	
After Ma 10. 11. STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE VALUE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	☐ Change☐ Cha	Addition Addition	
After Ma	ay 1, 2007 Fee will be \$550. OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TILE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition	
After Ma	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition	
After Ma 10. 11. STREET ADDRESS CITY ST ZIP HITE NAME STREET ADDRESS CITY ST ZIP 11. 11. 11. 11. 11. 11. 11. 1	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition	
After Mis 10. SHEET ADDRESS CITY ST ZIP HITLE NAME STREET ADDRESS CITY ST ZIP STREET ADDRESS CITY ST ZIP HITLE NAME STREET ADDRESS CITY ST ZIP HITLE NAME CITY ST ZIP HITLE NAME CITY ST ZIP CITY ST ZIP CITY ST ZIP	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREET ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition	
After Ma 10. 113. STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition Addition	
After Ma 10. 11. SHEEL ADDRESS CITY ST ZIP HITE NAME STREET ADDRESS CITY ST ZIP HITE SHEEL ADDRESS CITY-ST-ZIP HITE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND P GALLO, JAIME E 5465 NW 190 ST OPA LOCKA, FL 33055 VP GALLO, EINAR E 8958 NW 120 ST HIALEAH, FL 33018	Trust Fund Contr	TITLE NAME SIREEI ADDRESS CITY-ST ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY ST ZIP TITLE	dded to Fees	CHANGES TO OFFIC	Change Change Change Change	Addition Addition Addition Addition	

12. Thereby certify that the information supplied with this filling 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 composition or the report 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

SIGNATURE

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

4/3/07

786.346.1016

Day