

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

4/2

**FILED**  
**May 19, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90090 005 \*\*\*150.00

|   |   |   |   |   |  |
|---|---|---|---|---|--|
| <b>DOCUMENT # P07000037885</b>  |   |   |   |   |  |
| <b>1. Entity Name</b><br><b>FRED'S AWNING SERVICES, INC.</b>  |   |   |   |   |  |
| <b>Principal Place of Business</b><br>3908 EAST LAKE ROAD<br>MIRAMAR, FL 33023 US   |   |   | <b>Mailing Address</b><br>3908 EAST LAKE ROAD<br>MIRAMAR, FL 33023 US                 |   |  |
| <b>2. Principal Place of Business - No P.O. Box #</b>   |   | <b>3. Mailing Address</b>   |   |   |  |
| Suite, Apt. #, etc.   |   | Suite, Apt. #, etc.   |   |   |  |
| City & State  |   | City & State  |   | 04052008    Chg-P    CR2E034 (12/06)                              |  |
| Zip   |   | Country   |   | <b>4. FEI Number</b><br>77-0677324                                |  |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |   |   |   | <b>Applied For</b><br>Not Applicable                              |  |
| <b>6. Name and Address of Current Registered Agent</b>  |   |   | <b>7. Name and Address of New Registered Agent</b>                                    |   |  |
| DALEY, FREDERICK<br>3908 EAST LAKE ROAD<br>MIRAMAR, FL 33023  |   |   | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |   |  |
| <b>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.</b>  |   |   |   |   |  |
| <b>SIGNATURE</b> _____ (NOTE: Registered Agent signature required when reinstating) <b>DATE</b> _____   |   |   |   |   |  |
| <b>FILE NOW!!! FEE IS \$150.00</b><br><b>After May 1, 2008 Fee will be \$550.00</b>   |   | <b>9. Election Campaign Financing</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> |   |   |  |
| <b>10. OFFICERS AND DIRECTORS</b>   |   |   | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                          |   |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | P <input type="checkbox"/> Delete<br>DALEY, FREDERICK<br>3908 EAST LAKE ROAD<br>MIRAMAR, FL 33023 |   | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>  | VP <input type="checkbox"/> Delete<br>DALEY, LEONARD<br>3908 EAST LAKE ROAD<br>MIRAMAR, FL 33023  |   | <b>TITLE</b><br><b>NAME</b><br><b>STREET ADDRESS</b><br><b>CITY-ST-ZIP</b>            | <input type="checkbox"/> Change <input type="checkbox"/> Addition |  |
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| <b>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.</b> |   |   |   |   |  |
| <b>SIGNATURE:</b> _____   |   |   | 05-15-008<br>Date    Daytime Phone #  |   |  |