2008 FOR PROFIT CORPORATION ANNUAL REPORT.

FILED Apr 18, 2008 8:00 am Secretary of State

04-18-2008 90045 018 ***150 00

DOCUMENT # P07000080911 1. Entity Name BIG H INSTALLERS, INC.						SUME	04-18-2008	90045 0	18 ***150).00
Principal Place of Business Mailing Address 4687 KELLY DRIVE 4687 KELLY E WEST PALM BEACH, FL 33415 US WEST PALM B				L 33415	5 US	110011001101	18III 18811 8 7 111 8 5 111 3 8	IIA 38161 IBIN 88	11 0 (1510)	1 11 // 1710
2. Principal Place of Business - No P.O. Box #			3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03102008	Chg-P	CR2E0	34 (12/06)	
City & State			City & State			4. FEI Number		71		plied For Applicable
Zip Country		Zip	Zip Country		5. Certificate of	of Status Desired		\$8.75 Addi Fee Required		
	6. Name	and Address of Curren	t Registered Agent		Name	7. Name and	Address of New	Registered /	\gent	
-FERTIC, SION HENRY				-	Street Address	s (P.O. Box Numbe	r is Not Acceptab	le)		
WEST PAI	LM BEAC	H, FL 33415								
					City			FL	Zip Code	•
	named entit tions of regis		for the purpose of changing it	s register	ed office or regist	tered agent, or both	n, in the State of F	lorida. I am	familiar with,	and accept
SIGNATURE.	Signature, typed	or printed name of registered ager	nt and title if applicable. (NO	TE: Registere	d Agent signature requir	ired when reinstating)		DATE		
		FEE IS \$150.00 8 Fee will be \$550	9. Election Camp Trust Fund Cor			5.00 May Be dded to Fees				
	ay 1, 200		D DIRECTORS		Ā	dded to Fees	CHANGES TO OF	FICERS AND		
After Ma	P,D FERTIC, 4687 KEL	8 Fee will be \$550	Trust Fund Cor	11. TITU NAM	E Å	dded to Fees	CHANGES TO OF	FICERS AND	DIRECTORS Change	G IN 11
After Ma 10. TITLE NAME STREET ADDRESS	P,D FERTIC, 4687 KEL	OFFICERS AND SION HENRY LLY DRIVE	Trust Fund Cor	11. ITU NAM STRE CITY TITLL NAM STRE	E E E E E E E E E E E E E E E E E E E	dded to Fees	CHANGES TO OF	FICERS AND		
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	P,D FERTIC, 4687 KEL	OFFICERS AND SION HENRY LLY DRIVE	Trust Fund Con D DIRECTORS Delete	11. ITTU NAM STRE CITY ITTU NAM STRE CITY ITTU NAM STRE CITY TITU NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	dded to Fees	CHANGES TO OF	FICERS AND	Change	Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P,D FERTIC, 4687 KEL	OFFICERS AND SION HENRY LLY DRIVE	Trust Fund Con D DIRECTORS Delete Delete Delete	11. ITTL NAM STRE CITY ITTL NAM	E E E E E E E E E E E E E E E E E E E	dded to Fees	CHANGES TO OF	FICERS AND	☐ Change	☐ Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	P,D FERTIC, 4687 KEL	OFFICERS AND SION HENRY LLY DRIVE	Trust Fund Con D DIRECTORS Delete Delete Delete Delete	11. ITTL NAM STRE CITY ITTL NAM STRE CITY TITL NAM	E E E E E E E E E E E E E E E E E E E	dded to Fees	CHANGES TO OF	FICERS AND	☐ Change	Addition Addition
After M: 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	P,D FERTIC, 4687 KEL WEST PA	OFFICERS ANI SION HENRY LLY DRIVE ALM BEACH, FL 3341	Trust Fund Con D DIRECTORS Delete Delete Delete Delete	11. ITTLI NAM STRE CITY TITLI NAM STRE CITY	E E E E E E E E E E E E E E E E E E E	ADDITIONS/0			☐ Change ☐ Change ☐ Change ☐ Change ☐ Change	Addition Addition Addition Addition

2. Thereby certify that the information's applied with this limit does not quality for the exemptions contained in Chapter 16, Horida Statutes. The first 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 outh; 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.

SIGNATURE

TACTORE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

+ 4/14/03 (56) 313 656