## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 27, 2007 08:00 AM Secretary of State **DOCUMENT # P95000066385** 1. Entity Name INTERNATIONAL BUILDING SUPPLIES, INC. Principal Place of Business Mailing Address 20410 S.W. 48TH PLACE 20410 S.W. 48TH PLACE FORT LAUDERDALE, FL 33332 FORT LAUDERDALE, FL 33332 No Chg-P CR2E034 (11/05) 04162007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0614648 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent PADRON, TIMOTHY A DO NOT WRITE 20410 S.W. 48TH PLACE FORT LAUDERDALE, FL 33332 IN THIS SPACE 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE PADRON, TIMOTHY A NAME U00000736479 05/10/07-80075-018 150.00 STREET ADDRESS 20410 S.W. 48TH PLACE CITY-ST-ZIP FORT LAUDERDALE, FL 33332 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP THE MAME STREET ADDRESS CITY-ST-ZIP

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.

SIGNATURE:

TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNARY OFFICER OR DIRECTOR

4-2507

305-301-7931

Daytime Phone #

**FILED**