2008 FOR PROFIT CORPORATION

FILED · ANNUAL REPORT Apr 24, 2008 08:00 AN Secretary of State **DOCUMENT #P96000023578** 1. Entity Name A & C PLASTERING, INC. Principal Place of Business Mailing Address P.O. BOX 162 217 95TH ST OCEAN MARATHON, FL 33050 MARATHON, FL 33050 CR2E034 (11/05) 01082008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0648683 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HEWLETT, GAYLE DO NOT WRITE 217 95TH ST OCEAN MARATHON, FL 33050 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME NATTA, ANTHONY P.O. BOX 1432 STREET ADDRESS U00000918591 CITY-ST-ZIP MARATHON, FL 33050 05/13/08-80088-015 150.00 TITLE HEWLETT, GAYLE NAME 217 95TH ST OCEAN STREET ADDRESS MARATHON, FL. 33050 CITY-ST-7iP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR