


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2007 8:00 am
Secretary of State

01-25-2007 90043 045 ***158.75

DOCUMENT # P96000037910 1. Entity Name EASTMAN ALUMINUM, INC.					
Principal Place of Business 214 S. "H" STREET STE #7 LAKE WORTH, FL 33460			Mailing Address P.O. BOX 351 LAKE WORTH, FL 33460		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		4. FEI Number 65-0662386 Applied For <input type="checkbox"/> Not Applicable	
Country		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PELAEZ, ROM 215 18TH AVE SOUTH APT. 2 LAKE WORTH, FL 33460				7. Name and Address of New Registered Agent Name <u>Rom Pelaez</u> Street Address (P.O. Box Number is Not Acceptable) <u>4080 Chucker Drive</u> City <u>West Palm Beach</u> FL <u>33406</u>	
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 <u>Rom Pelaez</u> (NOTE: Registered Agent signature required when reinstating) DATE <u>1/19/07</u>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P PELAEZ, ROM 215 18TH AVE SOUTH #2 LAKE WORTH, FL 33460		TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition	
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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: <u>Rom Pelaez</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			<u>Rom Pelaez</u> <u>1/19/07</u> <u>561-373-4956</u> Date Daytime Phone #		