


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005 8:00 am
Secretary of State

04-27-2005 90279 005 ***150.00

DOCUMENT # P96000099052

1. Entity Name
 NSJ FRAMING, INC.




Principal Place of Business Mailing Address

9209 YELLOW LAKE DR 9209 YELLOW LAKE DR
 NEW PORT RICHEY, FL 34654 US NEW PORT RICHEY, FL 34654 US

DO NOT WRITE IN THIS SPACE

140-100



01112005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3417328	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

FLUET, JEAN
 9209 YELLOW LAKE DR
 NEW PORT RICHEY, FL 34654

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FLUET, JEAN 9209 YELLOW LAKE DR NEW PORT RICHEY, FL 34654
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Jean Fluet* 4/24/05 Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 JEAN FLUET, PRES