2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 16, 2007 08:00 AN DOCUMENT # P97000051919 **Secretary of State** 1. Entity Name ECONOMY GARAGE DOORS, INC. Principal Place of Business Mailing Address 3900 SE 45TH CT #4 P O BOX 830388 OCALA, FL 34480 OCALA, FL 34483 CR2E034 (11/05) 03152007 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3450794 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent NAZZARI, PHILIP V DO NOT WRITE 3809 NE 1TH ST OCALA, FL 34471 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 primed neme 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 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. 10. OFFICERS AND DIRECTORS TIZEE NAZZARI, PHILIP V NAME STREET ADDRESS 3809 NE 11TH ST CITY-ST-ZIP OCALA, FL 34480 MLE MAME STREET ADDRESS CITY - ST - ZIP TITLE MALAE STREET ABBRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE MIE NAME STREET ADDRESS CITY-ST-7IP MILE NAME

12. I horeby 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: \

STREET ADDRESS CITY-ST-ZIP ITILE NAME STREET ADDRESS CITY-ST-ZIP

MATURE 1910 TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13/15/07

1352 UH SUA

Daytime Phone #

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