## 2007 FOR PROFIT CORPORATION

## **FILED** Apr 10, 2007 08:00 All Secretary of State

ANNUAL REPORT									
DOCUMENT # PS 1. Entity Name LINCOLN FRAMING, CO									
Principal Place of Business 8550 NW 4 ST PEMBROKE PINES, FL 33024	Mailing Address 8550 NW 4 ST US PEMBROKE PINES, FL 33024	US							

DO NOT WRITE IN THIS SPAC			Œ	03072007 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For 65-0815062 Not Applie  5. Certificate of Status Desired   \$8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent					بليستون بلد رجان بوسته	a dear and	. "	
MARTINEZ, LINCOLN 8550 NW 4 ST PEMBROKE PINES, FL 33024			DO NOT WRITE IN THIS SPACE					
	named entity submits this statement for the plicons of registered agent.  Signature, typed or printed name of registered agent and title			gistered agent, or both	, in the State of Flo	oate	with, and accept	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.		cing	\$5.00 May Be Added to Fees					
10.	10. OFFICERS AND DIRECTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MARTINEZ, LINCOLN 8550 NW 4 ST PEMBROKE PINES, FL 33024	·				000696957 07-80021-	002 150.0	
TITLE NAME STREET ADDRESS CITY-SI-ZIP							·	
TITLE NAME STREET ADDRESS CITY+ST-ZIP				DO	NOT W	RITE		

IN THIS SPACE STREET ADDRESS CITY-ST-ZIP STREET ADDRESS

12. Thereby 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 apport 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.

TITLE NAME

TITLE NAME

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MESIDENI

4/6/07 -280-1 Date

MARTINEZ