2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000098148

Entity Name: LIFETIME EXTERIORS, INC.

FILED Jan 04, 2006 Secretary of State

| Current Principal Place of Business: | New Principal Place of Business: |
|--------------------------------------|----------------------------------|
|--------------------------------------|----------------------------------|

3285 LAKE WORTH RD.

32 SOUTH F STREET
LAKE WORTH, FL 33460

LAKE WORTH, FL 33461

Current Mailing Address: New Mailing Address:

3285 LAKE WORTH RD.

32 SOUTH F STREET
LAKE WORTH, FL 33460

LAKE WORTH, FL 33461

FEI Number: 65-0887059 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MEARS, STEVE
3285 LAKE WORTH RD. M
LAKE WORTH, FL 33461 US

MEARS, STEVE
32 SOUTH F STREET
LAKE WORTH, FL 33460 US

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.

SIGNATURE: SM 01/04/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 MEARS, STEVE
 Name:
 MEARS, STEVE

 Address:
 3285 LAKE WORTH RD., STE M
 Address:
 32 SOUTH F STREET

 City-St-Zip:
 LAKE WORTH, FL 33461
 City-St-Zip:
 LAKE WORTH, FL 33460

Title: VP (X) Delete Title: () Change () Addition

 Name:
 BURNS, STEVE
 Name:

 Address:
 16526 81ST LANE N.
 Address:

 City-St-Zip:
 LOXAHATCHEE, FL 33470
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 FRAZIER, JIMMY
 Name:

 Address:
 3285 LAKE WORTH ROAD
 SUITE M
 Address:

 City-St-Zip:
 LAKE WORTH, FL 33461
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SREVE MEARS D 01/04/2006