## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## . Feb 28, 2005 08:00 AM **Secretary of State** DOCUMENT # P99000008063 1. Entity Name TOP FLOOR BUILDING PRODUCTS, INC. Principal Place of Business Mailing Address 7232 JOHN SILVER LN 7232 JOHN SILVER LN SARASOTA, FL 34231 SARASOTA, FL 34231 01182005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3567673 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ANDREU, STEPHEN DO NOT WRITE 7232 JOHN SILVER LANE SARASOTA, FL 34231 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. (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable 02/28/05-80084-022 150**.00** 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE ANDREU, STEPHEN NAME STREET ADDRESS 7232 JOHN SILVER LANE SARASOTA, FL 34231 CITY-ST-ZIP TITLE NAL/F STREET ADDRESS CITY-ST-ZIP TITLE The second secon NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME. STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(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

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: .

**FILED**