2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 11, 2008 08:00 All Secretary of State **DOCUMENT # P99000027820** TURNBOW SHEET METAL, INC. Principal Place of Business Mailing Address 8149 PORTULAÇA AVENUE 8149 PORTULACA AVENUE SEMINOLE, FL. 33777 SEMINOLE, FL 33777 04042008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3570558 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent BOYDSTON DABROSKI LYLE AND WOOD DO NOT WRITE 2639 ML KING BV 9TH ST N PO BOX DRAWER 76387 IN THIS SPACE ST PETE, FL 33734 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 Signature, typed or ponted name of registered agent and life if applicable (NOTE: Registered Agent signesure required when remissating) FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE TURNBOW, RICHARD H NAME STREET ADDRESS 8149 PORTULAÇA AVENUE CITY-ST-ZIP SEMINOLE, FL 33777 TITLE NAME TURNBOW, BARBARA JEAN STREET ADDRESS 8149 PORTULACA AVENUE CITY-ST-7IP SEMINOLE, FL 33777 nn e NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby 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 passes 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 attachings transfer an address, with all other like employments.

SIGNATURE

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/6/08

392-2834 Danting Property

FILED