2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

May 03, 2004 08:00 AM Secretary of State DOCOMENT # \$28559 UNIVERSAL ALUMINUM WINDOWS AND DOORS, INC. Principal Place of Business Mailing Address 1675 W. 31ST PLACE 1675 W. 31ST PLACE US HIALEAH, FL 33012 US HIALEAH, FL 33012 CR2E034 (10/03) 04272004 No Cha-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0248500 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FERNANDEZ, JOSE M. DO NOT WRITE 1675 W. 31ST PLACE HIALEAH, FL 33012 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS THE NAME FERNANDEZ, JOSE M Uniford 46591 15/03/04-20072-003 150.00 STREET ADDRESS 1675 W. 31ST PLACE CITY-ST-ZIP HIALEAH, FL SD TITLE MARTINEZ, ONELIA NAME 11991 SW 35 ST STREET ADDRESS MIAMI, FL 33175 CITY-ST-ZIP TD TITLE FERNANDEZ, MONICA NAME STREET ADDRESS 1675 W 31 PL DO NOT WRITE CITY - ST - ZIP HIALEAH, FL IN THIS SPACE TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED