

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V25475

Entity Name: TRIM WORKS, INC.

FILED
Feb 21, 2006
Secretary of State

Current Principal Place of Business:

12214 KITTEN TR.
HUDSON, FL 34669 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6132
SPRING HILL, FL US

New Mailing Address:

PO BOX 6132
SPRING HILL, FL 34606 US

FEI Number: 59-3115852

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEIBECK, RICHARD
12214 KITTEN TR.
HUDSON, FL 34669 US

Name and Address of New Registered Agent:

HEIBECK, RICHARD L
12214 KITTEN TR.
HUDSON, FL 34669 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: RICHARD L. HEIBECK

02/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: HEIBECK, RICHARD,
Address: 12214 KITTEN TR.
City-St-Zip: HUDSON, FL 34669

Title: D () Delete
Name: HEIBECK, RICHARD,
Address: 12214 KITTEN TR.
City-St-Zip: HUDSON, FL 34669

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: HEIBECK, RICHARD L
Address: 12214 KITTEN TR.
City-St-Zip: HUDSON, FL 34669

Title: D (X) Change () Addition
Name: HEIBECK, RICHARD L
Address: 12214 KITTEN TR.
City-St-Zip: HUDSON, FL 34669

Title: TR () Change (X) Addition
Name: ANDERSON, SHEILA R
Address: 12214 KITTEN TRAIL
City-St-Zip: HUDSON, FL 34669 US

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: SHEILA R. ANDERSON

T

02/21/2006

Electronic Signature of Signing Officer or Director

Date