2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V30190

Address: City-St-Zip:

ST AUGUSTINE, FL 32080

EARL OLIFEN FRAMING INC.

FILED Apr 08, 2004 Secretary of State

Entity Name: EARL QUEEN FRAMING INC. **Current Principal Place of Business: New Principal Place of Business:** 5455 5TH STREET 5455 5TH STREET ST. AUGUSTINE, FL 32084 ST. AUGUSTINE, FL 32080 US LIS **Current Mailing Address: New Mailing Address:** 5455 5TH STREET 5455 5TH STREET ST. AUGUSTINE, FL 32084 US ST. AUGUSTINE, FL 32080 US FEI Number: 59-3125062 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: QUEEN, EARL QUEEN, EARL 142 DRAKE ROAD 5455 5TH STREET ST. AUGUSTINE, FL 32086 ST. AUGUSTINE, FL 32080 US 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: 04/08/2004 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition QUEEN, EARL, Name: Name: 5455 5TH STREET Address: Address: City-St-Zip: ST AUGUSTINE, FL 32080 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: QUEEN, VICKIE, Name: 5455 5TH STREET Address: Address: ST AUGUSTINE, FL 32080 City-St-Zip: City-St-Zip: () Delete Title: Title: () Change () Addition MESSERREY, PHILLIP Name: Name: 5455 5TH STREET Address:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

City-St-Zip:

SIGNATURE: VICKIE QUEEN VP 04/08/2004