2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000141052

Current Principal Place of Rusiness:

Entity Name: ADVANCED BUILDING SPECIALTIES, INC.

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() Delete

ELWOOD, CASELLAS

SAN JUAN, PR 00907

MALDONADO, NEIL

SAN JUAN, PR 00907

2301 WILLIAMS BLVD E

ELIAS, MIGUEL A

KENNER, LA 70065

SEC

SEC

120 CONDADO ST STE 205

1475 WILSON ST STE 3-A

Name:

Title:

Title:

Name:

Address:

City-St-Zip:

Name: Address:

City-St-Zip:

Address: City-St-Zip:

FILED Aug 07, 2009 Secretary of State

New Principal Place of Rusiness

ELWOOD, CASELLAS

SAN JUAN, PR 00907

120 CONDADO ST STE 205

Name:

Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Address:

City-St-Zip:

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Our Cit i	c or Business.	New I IIII	New I Interpart face of Dasiness.			
31601 SW HOMESTE	217 AVE AD, FL 330	34				
Current M	ess:	New Maili	New Mailing Address:			
PO BOX 34 HOMESTE	13455 AD, FL 330	34				
FEI Number:	26-0131126	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Na				lame and Address of New Registered Agent:		
NRAI SER' 2731 EXEC WESTON,	K DRIVE, SUITE 4 US	120 CONE SUITE 205	VAZQUEZ, HECTOR D PRES 120 CONDADO AVENUE SUITE 205 SAN JUAN, FL 00910 US			
The above in the State		y submits this statement for the p	urpose of changing	ts register	ed office or registered agent, or both,	
SIGNATURE: HECTOR D. VAZQUEZ DIAZ				08/07/2009		
Electronic Signature of Registered Agent				Date		
Election Can	npaign Financi	ng Trust Fund Contribution ().				
OFFICERS	CTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	VAZQUEZ, H	00 ST STE 205	Title: Name: Address: City-St-Zip:	120 CONE	(X) Change () Addition , HECTOR D DADO ST STE 205 I, PR 00907	
Title: Name: Address: City-St-Zip:	VPD (BELMONTE, CALLE 67 AV MARACAIBO,	'E 3D EDIF	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	т () Delete	Title [.]	TRFA	(X) Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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: HECTOR D. VAZQUEZ DIAZ **PRES** 08/07/2009