2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 209525

FILED Apr 22, 2005 Secretary of State

Entity Name: YALE OGRON MANUFACTURING COMPANY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
5201 NW DPA LOC	734 AVE KA, FL 330542	2449		
Current Mailing Address:		New Mailing Address:		
5201 NW DPA LOC	734 AVE KA, FL 330542	2449		
El Number	: 59-0830594	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:
5201 NW	JEFFREY ' 34 AVE			
DPA LOC	KA, FL 330542	2449 US		
he above	,		ourpose of changing its registe	red office or registered agent, or both,
he above	named entity e of Florida.		ourpose of changing its registe	red office or registered agent, or both,
he above the State	named entity e of Florida. RE:			red office or registered agent, or both, Date
The above In the State	named entity e of Florida. RE: Electror	submits this statement for the p		
The above n the State BIGNATUI	named entity e of Florida. RE: Electror	submits this statement for the pair of the pair of Registered Age of Trust Fund Contribution ().	ent	
The above in the State SIGNATUI SI CONTROL CARROLL CONTROL CARROLL CAR	named entity e of Florida. RE: Electror mpaign Financin S AND DIREC	submits this statement for the particle Signature of Registered Age of Trust Fund Contribution (). TORS: Delete H AVE	ent	Date
The above n the State BIGNATUI	e named entity e of Florida. RE: Electron mpaign Financin S AND DIREC PD (OGRON, YALE 15201 NW 34T OPA LOCKA, F	submits this statement for the particles of Registered Age of Trust Fund Contribution (). TORS:) Delete H AVE 1L 33054) Delete REY, H AVE	ADDITIONS/CHAN Title: Name: Address:	Date GES TO OFFICERS AND DIRECTORS

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.

SIGNATURE: JEFFREY OGRON VD 04/22/2005