2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2007
Secretary of State

DOCUMENT# 209525

Entity Name: YALE OGRON MANUFACTURING COMPANY, INC.

Current Principal Place of Business:

15201 NW 34 AVE
OPA LOCKA, FL 330542449

New Principal Place of Business:

Current Mailing Address:

15201 NW 34 AVE
OPA LOCKA, FL 330542449

New Mailing Address:

FEI Number: 59-0830594 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

OGRON, JEFFREY
15201 NW 34 AVE
OPA LOCKA, FL 330542449 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: OGRON, YALE,
Address: 15201 NW 34TH AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: VD ( ) Delete
Name: OGRON, JEFFREY,
Address: 15201 NW 34TH AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: D ( ) Delete
Name: RODRIGUEZ, SHARRY O MRS
Address: 15201 NW 34 AVE
City-St-Zip: OPA LOCKA, FL 33054

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: OGRON, YALE
Address: 15201 NW 34TH AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: VD (X) Change ( ) Addition
Name: OGRON, JEFFREY
Address: 15201 NW 34TH AVE
City-St-Zip: OPA LOCKA, FL 33054

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JEFFREY OGRON VD 07/09/2007

Electronic Signature of Signing Officer or Director — Date