


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 27, 2006 08:00 AM
Secretary of State

DOCUMENT # F96000001384

1. Entity Name
PYRAMID MACHINE TOOL CO., INC.



Principal Place of Business Mailing Address

**104 CAMELOT RIDGE DR
BRANDON, FL 33511 US** **104 CAMELOT RIDGE DR
BRANDON, FL 33511 US**

U00000542202
05/10/06-80088-016 150.00



04052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 35-1785375	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**LATUSZEK, LANCE
104 CAMELOT RIDGE DR
BRANDON, FL 33511**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:  **LANCE LATUSZEK/pres.** **4/9/06**
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LATUSZEK, LANCE 104 CAMELOT RIDGE DR BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VDC LATUSZEK, MARY Y 104 CAMELOT RIDGE DR BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT LATUSZEK, LANCE 104 CAMELOT RIDGE DR BRANDON, FL 33511
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LATUSZEK, MARLENE 1126 LOMSDEN TRACE CR VALRICO, FL 33569
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **LANCE LATUSZEK/pres** **4/9/06** **813-689-2533**
Signature and typed or printed name of signing officer or director Date Daytime Phone #