2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000001384

City-St-Zip:

VALRICO, FL 33594

Entity Name: PYRAMID MACHINE TOOL CO., INC.

FILED Apr 21, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:	
	WAY ESTATE FL 33594	S COURT US		
Current Mailing Address:			New Mailing Address:	
	WAY ESTATE FL 33594	S COURT US		
FEI Number	: 35-1785375	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:	
	WAY ESTATE	ES COURT US		
	named entity e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATUI	RE:			
	Electro	nic Signature of Registered Age	ent	Date
Election Car	mpaign Financin	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	LATUSZEK, LA	Y ESTATES COURT	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	LATUSZEK, M	Y ESTATES COURT	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	LATUSZEK, LA	Y ESTATES COURT	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address:	S (LATUSZEK, M 1126 LUMSDE		Title: Name: Address:	() 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.

City-St-Zip:

SIGNATURE: LANCE LATUSZEK Ρ 04/21/2009