


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
May 02, 2006 08:00 AM
Secretary of State**

DOCUMENT # P98000107255
1. Entity Name
ANTHONY FABRICATION, INC.



Principal Place of Business: 2661 NE 97TH ST RD, ANTHONY, FL 32617
Mailing Address: PO BOX 151, ANTHONY, FL 32617

DO NOT WRITE IN THIS SPACE



03162006 No Chg-P CR2E034 (11/05)

4. FEI Number: 59-3553341 Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BASS, CHARLES E
2661 NE 97TH ST RD
ANTHONY, FL 32617

**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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

U00000558582
05/17/06-80100-005 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD BASS, CHARLES E 2661 NE 97TH ST RD ANTHONY, FL 32617
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPSD BASS, JUNE E 2661 NE 97TH ST RD ANTHONY, FL 32617
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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: *Charles E Bass* *May-02-06* *352-629-5324*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #