

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 364854

Entity Name: KRYSHER-DELZER, INC.

FILED
Mar 16, 2007
Secretary of State

Current Principal Place of Business:

6137 SR 54
NEW PORT RICHEY, FL 34653 US

New Principal Place of Business:

Current Mailing Address:

6137 SR 54
NEW PORT RICHEY, FL 34653 US

New Mailing Address:

FEI Number: 59-1356720

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEDDELER, CARL A.
6137 SR 54
NEW PORT RICHEY, FL 34653 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FEDDELER, CARL A
Address: 6137 SR 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: V () Delete
Name: KRYSHER, WILLIAM S
Address: 6137 SR 54
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: STD () Delete
Name: DELZER, HARVEY V,
Address: 7920 US HWY 19
City-St-Zip: PORT RICHEY, FL 34668

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL FEDDELER

PRES

03/16/2007

Electronic Signature of Signing Officer or Director

Date