2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2005 08:00 AM
Secretary of State

1. Entity Nam TAMPA N	MACHINE PRODUCTS, INC.	ailing Address		Secretar	y of State
151 VOLLMER AVENUE P.O. BOX 2152 OLDSMAR, FL 34677 OLDSMAR, FL 34677					
DO NOT WRITE IN THIS SPACE				01072005 No Chg-P CR2E034 (10/03)
					Applied For Not Applicable 75 Additional Required
6. Name and Address of Current Registered Agent					
LYNGHOLM, JAMES A 11310 HUTCHENS RD. ODESSA, FL 33556			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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature regulard when reinstating) DATE					
				5.00 May Be Ided to Fees	
10.	OFFICERS AND DIRECT	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LYNGHOLM, JAMES A 11310 HUTCHENS RD. ODESSA, FL 33556		 	U00000207263 02/01/05~80040-00	01 150.00
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TITLE NAME		+••			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.					