

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 670681

FILED
Jul 19, 2007
Secretary of State

Entity Name: MURTON INDUSTRIES, INC.

Current Principal Place of Business:

1745 W 31 PLACE
HIALEAH, FL 33012

New Principal Place of Business:

Current Mailing Address:

1745 W 31 PLACE
HIALEAH, FL 33012

New Mailing Address:

FEI Number: 59-1983592

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HELVIE, COLLEEN
1745 W 31 PLACE
HIALEAH, FL 33012 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: PTSD () Delete
Name: HELVIE, COLLEEN
Address: 1745 W 31 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: V () Delete
Name: HELVIE, JOHN
Address: 1745 W. 31 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change () Addition
Name: HELVIE, JOHN
Address: 1745 W. 31 PLACE
City-St-Zip: HIALEAH, FL 33012

Title: D () Change (X) Addition
Name: DYER, TOM
Address: 1745 W 31 PL.
City-St-Zip: HIALEAH, FL 33012

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.

SIGNATURE: COLLEEN HELVIE

PTSD

07/19/2007

Electronic Signature of Signing Officer or Director

Date