2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2007 08:00 A
Secretary of State

DOCUMENT # 832858

1. Entity Name
CENTURY FASTENERS CORP

Principal Place of Business	Mailing Address
50-20 IRELAND ST. ELMHURST, NY 11373	50-20 IRELAND ST. ELMHURST, NY 11373

04132007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
11-1781097
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301

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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, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CEO
NAME	SCHLEGEL,JACK
STREET ADDRESS	5801 BRIDLEWAY CIRCLE
CITY-ST-ZIP	BOCA RATON, FL
TITLE	COO
NAME	STIEGLITZ, GEORGE
STREET ADDRESS	11562 LOSANO DR
CITY-ST-ZIP	BOYNTON BEACH, FL
TITLE	P
NAME	STIEGLITZ, EVAN
STREET ADDRESS	2 WOODACRES RD
CITY-ST-ZIP	BROOKVILLE, NY 11545
TITLE	VTS
NAME	BRODSKY, THOMAS
STREET ADDRESS	3182 DENTON DR.
CITY-ST-ZIP	MERRICK, NY
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000716033
04/28/07-80015-004 150.00

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: _____ EXEC. VP 4/13/07
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #