


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 26, 2007 08:00 AM
Secretary of State

DOCUMENT # F00000007169 1. Entity Name PYRAMID MOULDINGS INC.	
--	---

Principal Place of Business 300 S MAGNOLIA AVE GREEN COVE SPRINGS, FL 32043	Mailing Address 300 S MAGNOLIA AVE GREEN COVE SPRINGS, FL 32043
---	---

DO NOT WRITE IN THIS SPACE



02152007 No Chg-P CR2E034 (11/05)

4. FEI Number 52-2283836	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE
SUITE 4
WESTON, FL 33331

**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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

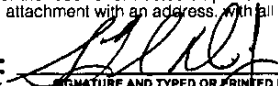
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
---	---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SMITH, F. PATRICK DR. 201 INDUSTRIAL PARKWAY SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT KATA, ED 201 INDUSTRIAL PARKWAY SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SCD MCWETHY, ANDREW J 201 INDUSTRIAL PARKWAY SOMERVILLE, NJ 08876
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MARTIN, RONALD R 9971 CEDAR KEG JACKSONVILLE, FL 32256
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DAVIS, GORDON S JR 3121 SECRET WOODS TR W JACKSONVILLE, FL 32216
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U000000678170
04/02/07-80022-014 150.00

**DO NOT WRITE
IN THIS SPACE**

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:  S. Gordon Davis, Jr. 3/22/07 904-284-5611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #