

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F59593

FILED
Jan 06, 2005
Secretary of State

Entity Name: SIXNEL PRECISION SHEETS METAL INC.

Current Principal Place of Business:

SH 15 NW 15TH ST.
#6
MARGATE, FL 33063

New Principal Place of Business:

5415 N.W. 15TH ST.
#6
MARGATE, FL 33063

Current Mailing Address:

5415 NW 15 ST BAY 6
MARGATE, FL 33063

New Mailing Address:

5415 NW 15TH ST,
#6
MARGATE, FL 33063

FEI Number: 59-2146637

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

LAMBERTI, HECTOR
4231 NW 55 DRIVE
COCONUT CREEK, FL 33073 US

Name and Address of New Registered Agent:

LAMBERTI, HECTOR
11175 NW 17TH PLACE
CORAL SPRINGS, FL 33071 US

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: HECTOR LAMBERTI

01/06/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LAMBERTI, HECTOR
Address: 11753 W. ATLANTIC BLVD. #3
City-St-Zip: COCONUT CREEK, FL

Title: VDS () Delete
Name: LAMBERTI, EDUARDO
Address: 9623 N.W. 24TH PLACE
City-St-Zip: CORAL SPRINGS, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LAMBERTI, HECTOR
Address: 11175 NW 17TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VDS (X) Change () Addition
Name: LAMBERTI, EDUARDO
Address: 9623 N.W. 24TH PLACE
City-St-Zip: CORAL SPRINGS, FL 33065

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HECTOR LAMBERTI

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date