2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # G81823

1. Entity Name
YORK INDUSTRIES INC.



FILED Apr 30, 2008 08:00 AM Secretary of State

Principal Place of Business

7240 S.W. 131 STREET MIAMI, FL 33156 Mailing Address

7240 S.W. 131 STREET MIAMI, FL 33156



DO	NOT	WRITE	M	THIS	SPACE
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 04252008
 No Chg-P
 CR2E034 (11/05)

 4. FEI Number
 Applied For

59-2496848 Not Applicable

5. Certificate of Status Desired Status Desired Fee Required

6. Name and Address of Current Registered Agent

PAZ G. 7240 SW 131ST ST. SUITE 228 MIAMI, FL 33156 DO NOT WRITE IN THIS SPACE

8. The above named entity subprits 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 required when reinstating) DATE									
		Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	TORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAZ, GUILLERMO R. 7240 S.W. 131 ST. MIAMI, FL								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PENA, ARTURO P. 8100 SW 138TH ST. MIAMI, FL				000000932803 05/22/08-80069-014 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		;		DO	NOT WRITE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:	IN T	THIS SPACE				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP									

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 true ee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

4/15/08

305-234-8380

Daytime Phone #