


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 8:00 am
Secretary of State

01-26-2005 90015 041 ***150.00

DOCUMENT # K12244
 1. Entity Name
 BONDED ALUMINUM INDUSTRIES, INC.



Principal Place of Business
~~12950 WALSINGHAM RD #2 LARGO, FL 33774 US~~

Mailing Address
~~12950 WALSINGHAM RD #2 LARGO, FL 33774 US~~

40007032



2. Principal Place of Business
 517 20TH AVE N.
 Suite, Apt. #, etc.
 INDIAN ROCKS BEACH

3. Mailing Address
 SAME AS

01132005 Chg-P CR2E034 (10/03)

City & State
 FLORIDA

City & State

4. FEI Number
 59-2868517

Applied For
 Not Applicable

Zip
 33785

Country
 USA

Zip
 Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 RUZICKA, RICHARD, JR.
~~12950 WALSINGHAM RD #2 LARGO, FL 33774~~

7. Name and Address of New Registered Agent
 Name
 RUZICKA, RICHARD, JR.
 Street Address (P.O. Box Number is Not Acceptable)
 517 20TH AVENUE
 City
 INDIAN ROCKS BEACH FL Zip Code
 33785

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: *Richard Ruzicka Jr. President* DATE: 1/21/05
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, 2005 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS	
TITLE D	<input type="checkbox"/> Delete
NAME RUZICKA, RICHARD, JR.	
STREET ADDRESS 12950 WALSINGHAM RD #2	
CITY-ST-ZIP LARGO, FL 33774	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P, D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME RUZICKA, RICHARD JR.	
STREET ADDRESS 517 20TH AVE	
CITY-ST-ZIP INDIAN ROCKS BEACH, FL 33785	
TITLE VP, S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME RUZICKA, BONNIE	
STREET ADDRESS 517 20TH AVE	
CITY-ST-ZIP INDIAN ROCKS BEACH, FL 33785	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Richard Ruzicka Jr. President* DATE: 1/21/05 DAYTIME PHONE #: 727 596-8030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR