

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K83075

**FILED**  
**Jan 05, 2006**  
**Secretary of State**

**Entity Name:** CYCLONE ROLLING DOOR MANUFACTURING CO., INC.

**Current Principal Place of Business:**

12195 NW 98 AVE  
HIALEAH GARDENS, FL 33016 US

**New Principal Place of Business:**

12195 NW 98 AVE  
HIALEAH GARDENS, FL 33018 US

**Current Mailing Address:**

12195 NW 98 AVE  
HIALEAH GARDENS, FL 33016 US

**New Mailing Address:**

12195 NW 98 AVE  
HIALEAH GARDENS, FL 33018 US

**FEI Number:** 65-0123248      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KLEIN, TED  
8030 PETERS ROAD  
BLDG D SUITE 104  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BERGER, ALLEN,  
Address: 12195 NW 98TH AVE.  
City-St-Zip: HIALEAH GDNS., FL 33018 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ALLEN BERGER

PD

01/05/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date