

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 24, 2006 8:00 am
Secretary of State

03-24-2006 90027 029 ***150.00

DOCUMENT # M26617

1. Entity Name
SFC VALVE CORPORATION



Principal Place of Business
**CANNERY RD.
PO BOX 630
SOMERSET, PA 15501-7630**

Mailing Address
**CANNERY RD.
PO BOX 630
SOMERSET, PA 15501-7630**

40038139



02022006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
25-1519834

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**ARAGON, RUDOLPH F.
2699 SOUTH BAYSHORE DR.
MIAMI, FL 33133**
*200 S. Biscayne Blvd, Suite 4900
Miami, FL 33131*

**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 *[Signature]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/15/06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	DPT
NAME	KIRST, JOSEPH D. II
STREET ADDRESS	RD 1
CITY-ST-ZIP	MARKLETON, PA
TITLE	DS
NAME	KIRST, ROBERT H.
STREET ADDRESS	RT. 1, BOX 379A
CITY-ST-ZIP	SOMERSET, PA
TITLE	DV
NAME	KIRST, ROBERT H.
STREET ADDRESS	RT. 1, BOX 379A
CITY-ST-ZIP	SOMERSET, PA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *[Signature]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/17/06 814MS 9671
Daytime Phone #

ATTACHMENT

40038139
M26617

GLOBAL / SFC VALVE CORPORATION

PO BOX 24

160 CANNERY ROAD

SOMERSET PA 15501-0024

Telephone 814-445-9671 Fax 814-443-1453

DCMC Small DoD Prime Contractor of the Year
Recipient - U.S. Small Business Administration's Award for Excellence

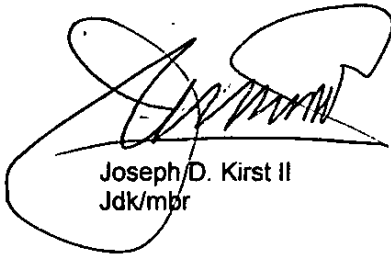
10MAR2006

Rudolph F. Aragon, Esquire
2699 South Bayshore Drive
Miami FL 33133

Dear Rudy,

Enclosed is SFC Valve Corporation's Uniform Business Report for 2006, along with our payment.
Would you please sign and forward the form and our check at your earliest convenience?

Thank you,



Joseph D. Kirst II
Jdk/mbp