

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 20, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000063383 1. Entity Name TRU MENSION MANUFACTURING SOLUTIONS, INC.	
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Principal Place of Business 3900 DOW ROAD SUITE A MELBOURNE, FL 32934	Mailing Address 3900 DOW ROAD SUITE A MELBOURNE, FL 32934
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01042006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3729621	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent FISHER, MARC J 3900 DOW RD STE A MELBOURNE, FL 32934
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**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  MARC J FISHER 
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**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 NAME STREET ADDRESS CITY - ST - ZIP	D SHEEHAN, KENNETH J 3900 DOW RD STE A MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FISHER, MARC J 3900 DOW RD STE A MELBOURNE, FL 32934
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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100000393507
01/25/06-80024-010 158.75

**DO NOT WRITE
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  MARC J FISHER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/13/06 321-255-4665
Date Daytime Phone #