2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P02000089027

1. Entity Name

C.K., SCREW MACHINE PRODUCTS, INC.



FILED Apr 19, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

6261 39TH ST Unit D 6261 39TH ST

UNIT D PINELLAS PARK, FL 33781 US UNIT D PINELLAS PARK, FL 33781

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03272007	No Chg-P	CR2E034 (11/05)			
4. FEI Number			Applied For		
03-0478	3333		Not Applicable		

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

KNEZICH, CHRISTOPHER L 6261 39TH ST UNIT D PINELLAS PARK, FL 33781

DO NOT WRITE IN THIS SPACE

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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, typed or printed name of registered agent and title	if applicable {NOTE: Registered	i Agent signature	required when reinitiating)	DATE				
FIL After Ma	E NOWI!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC	CTORS							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNEZICH, CHRISTOPHER L 6261 39TH ST UNIT D PINELLAS PARK, FL 33781								
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADORESS CITY-ST-ZIP				DO	NOT WRITE				
TITLE Name Street address City-St-Zip			ļ	IN '	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					U00000717137 04/30/07-80036-005 150.00				
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12. I hereby certify that the information supplied with this fiting 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:

STREET ADDRESS

BIOMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

3-30-07 77.528-236