## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 24, 2008 08:00 Al **ANNUAL REPORT Secretary of State** DOCUMENT # P02000089027 1. Entity Name C.K., SCREW MACHINE PRODUCTS, INC. Principal Place of Business Mailing Address 6261 39TH ST 6261 39TH ST UNIT D UNIT D PINELLAS PARK, FL 33781 PINELLAS PARK, FL 33781 US 03052008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 03-0478333 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KNEZICH, CHRISTOPHER L DO NOT WRITE 6261 39TH ST UNIT D IN THIS SPACE PINELLAS PARK, FL 33781 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when remistating) 04/03/08-80992-012 150.00 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE KNEZICH, CHRISTOPHER L NAME STREET ADDRESS 6261 39TH ST UNIT D PINELLAS PARK, FL 33781 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP

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 occupration 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 chapter on an attachment without address, with all other lates appeared.

SIGNATURE:

TITLE

STREET ADDRESS
CHY-ST-ZIP
TITLE
NAME
STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3-21-08 528-2366

FILED