

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000099802

**FILED
Apr 21, 2007
Secretary of State**

Entity Name: L.R.M. MANUFACTURING, INC

Current Principal Place of Business:

4641 18TH AVE
SAINT PETERSBURG, FL 33713

New Principal Place of Business:

Current Mailing Address:

7790 58TH STREET N
SAINT PETERSBURG, FL 33710

New Mailing Address:

1790 58TH STREET N
SAINT PETERSBURG, FL 33710

FEI Number: 01-0744708

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASTON, LARRY
1790 58TH STREET N
SAINT PETERSBURG, FL 33710 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: D () Delete
Name: RIVEROL, LEONARDO E
Address: 4641 18TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33713

Title: D () Delete
Name: MASTON, LARRY
Address: 1790 58TH STREET N
City-St-Zip: ST. PETERSBURG, FL 33710

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LARRY MASTON

PRSD

04/21/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date