## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P04000072303

**SECURE CHAIN & ROPE COMPANY** 



**FILED** Apr 30, 2007 08:00 AM Secretary of State

Principal Place of Business 10 S.W. 23RD STREET

FORT LAUDERDALE, FL 33315

Mailing Address

10 S.W. 23RD STREET

FORT LAUDERDALE, FL 33315



## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 04282007 No Chg-P

4. FEI Number 20-1060814

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

6. Name and Address of Current Registered Agent

PASTARNACK, MITCHEL ... 10 S.W. 23RD STREET FORT LAUDERDALE, FL 33315

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pulsons of registered agent.	urpose of changing its regis	stered office or re	gistered agent, or bo	th, in the State of Florida. I am familiar with, and accep	ot
SIGNATURE_	Signature, typed or printed name of registered agent and title if	appicable (NOTE: Regis	stered Agent signature r	equired when reinstating)	DATE	
FILE NOW!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				\$5.00 May Be Added to Fees		
10.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	P PASTARNACK, SCOTT 10 S.W. 23RD STREET FORT LAUDERDALE, FL 33315	TORS	,	in the second	•	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP PASTARNACK, MITCHEL 10 S.W. 23RD STREET FORT LAUDERDALE, FL 33315			, , , , ,	U00000749248 05/18/07-80017-004 150.00	
TITLE NAME STREET ADDRESS CITY - ST - ZIP			÷	DO	NOT WRITE	,
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN <sup>-</sup>	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
NAME STREET ADDRESS CITY-ST-ZIP				a Co		
12. I hereby certify that the information supplied with this filling 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.						