

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000089018

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: ALUMINUM TANK INDUSTRIES, INC.

**Current Principal Place of Business:**

36 SPIRIT LAKE RD  
WINTER HAVEN, FL 33880

**New Principal Place of Business:**

**Current Mailing Address:**

36 SPIRIT LAKE RD  
WINTER HAVEN, FL 33880

**New Mailing Address:**

FEI Number: 20-1219074

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LAMONICA, DANIEL  
84 TYLER RD.  
WINTER HAVEN, FL 33884 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: P ( ) Delete  
Name: LAMONICA, DANIEL  
Address: 84 TYLER RD.  
City-St-Zip: WINTER HAVEN, FL 33884

Title: VP ( ) Delete  
Name: POLLARD, CHAD  
Address: 1815 W. TAUNTON RD.  
City-St-Zip: AVON PARK, FL 33825

**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 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: DAN LAMONICA

PRES

04/25/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date