


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 8:00 am
Secretary of State

01-11-2008 90072 040 ***150.00

DOCUMENT # P06000130814

1. Entity Name
 TRS INDUSTRIES, INC.



Principal Place of Business: 8461 LAKE WORTH RD., STE. 188 LAKE WORTH, FL 33467

Mailing Address: 8461 LAKE WORTH RD., STE. 188 LAKE WORTH, FL 33467

2. Principal Place of Business - No P.O. Box #
 1490 Summit Run Cir
 Suite, Apt. #, etc.

3. Mailing Address
 1490 Summit Run Cir
 Suite, Apt. #, etc.


City & State: W Palm Bch FL

City & State: W Palm Bch FL

Zip: 33415-4879 Country: USA

Zip: 33415-4879 Country: USA

9000--



01022008 Chg-P CR2E034 (12/06)

4. FEI Number
~~APPLIED FOR~~ 56-2616869 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HURST, RONALD A. JR.
 8461 LAKE WORTH RD., STE. 188
 C/O LAW FIRM OF RONALD ANDERSEN HURST, JR.
 LAKE WORTH, FL 33467

7. Name and Address of New Registered Agent

Name: MARK YOHE

Street Address (P.O. Box Number is Not Acceptable):
 680 W INDUSTRIAL AVE #4

City: BOYNTON Bch FL Zip Code: 33426

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: Mark D. Yohe MARK D. YOHE DATE: 01/02/2008

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TELLEZ, FRANCIS P.O. BOX 540262 GREENACRES, FL 33454 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D FRANCIS TELLEZ 1490 SUMMIT RUN CIR W PALM BCH FL 33415-4879 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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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 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: Francis Tellez FRANCIS TELLEZ 1-7-08 (561) 379-2243
 PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #