FILED Apr 19, 2007 8:00 am Secretary of State 03-28-2007 90008 046 ***150.00

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000131637 1. Entity Name AGRI TECH FIREARMS, INC.							VVV.	T V O O	4	
Principal Place	e of Business		Mailing Address							
122 DAL HAL BOULEVARD 518 BEAR ROAD				13852 U	c					
LAKE PLACID	, FL 33852	US	LAKE PLACID, FL	3385Z U	3					
Principal Place of Business - No P.O. Box # 3. Mailing Address									19 M 181 M	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03152007	Chg-P	CR2E	034 (12/06)	
City & State			City & State			4. FELNumber	. 1725	m 2 /	·	plied For
Zip		Country	Zip	Cour	ntrv	20-	בכי ל	877	\$8.75 Ac	I Applicable
-	İ	550113 9			-,	5. Certificate o	Status Desired		Fee Require	
	6. Name a	nd Address of Current	Registered Agent		N	7. Name and A	ddress of New R	legisterod	Agent	
GRIGSBY	WILLIAM	.IR			Name					
GRIGSBY, WILLIAM JR. 518 BEAR ROAD					Street Address (P.O. Box Number	is Not Acceptable	3)		
LAKE PLACID, FL 33852						-				
					City				Zip Cod	
				·. · · · ·	<u> </u>		:	FL	<u>- </u>	
	rnamed entity tions of registe		or the purpose of changing	g its register	ed office or register	red agent, or both	_		tamiliar with,	and accept
SIGNATURE_	しんが	Im Goras	rbs ~				3-20	0-0	1	
SIGNATURE_	Signature, typed o	printed name of registered agent	and the if applicable	(NO FE: Requester	eri Agent signature required	seretating)		DATE	1 -	
		FEE IS \$150.00 Fee will be \$550.	9, Election Ca Trust Fund	mpaign Fina Contribution		.00 May Be ed to Fees				
10.		OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFF	ICERS AN	DIRECTOR	S IN 11
ture.	P -:		☐ Delete	TIFL					☐ Change	Addition
NAME		WILLIAM JR.		NAA CIP	Æ EET ADDRESS					}
STREET ADDRESS CITY-SI-ZIP	518 BEAR	CID, FL 33852			r-SI-ZIP					j
1/TLE	VP		☐ Delete	iit.	E				Change	Addition
NAME	GRIGSBY,			NA	AE .					_ (
STREET ADDRESS	518 BEAR				EET ADORESS Y-Si-Zip					ļ
CITY-ST-ZIP	LAKE PLA	CID, FL 33852	☐ Detete	int		 -			☐ Change	Addition
HAME			III DESER	NAM.						Accion
STREET ADDRESS					EET ADDRESS					{
CITY-ST-ZIP	<u> </u>				r-st-zip		 			
MAME			☐ Delete	THE NAM	1				☐ Change	Addition
STREET ADDRESS	ľ				EET ADDRESS					
CITY-ST-ZIP				cin	Y-S1-ZIP				_ -	
INTE			☐ Delete	1111					☐ Change	Addition
NAME STREET ADDRESS	1			NAA SIR	re Ee† adoress					}
CITY-ST-ZIP	1				I					1
GIT-SI-ZI				CIT	Y-ST-ZIP					1
TITLE			☐ fieleze	701	ı.	_			Change	Addition
TIFLE MAKE			☐ Delete	TITE	UE VE	_			Change	Addition
TIPLE			☐ Delete	TITE MAA STA	ı.			 _	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby	Certify that the	information supplied wit	h this filing does not que	TITE MAN SIR CIT	LE AE KET ADDRESS Y-S1-ZIP KOmptions contained	d in Chapter 119,	Florida Statutes. I	further ca	rtify that the i	nformation
TIFLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby inclicates	d on this moor	or supplemental report i	h this filing does not que	stales	LE ME EET ADDRESS Y-S1-ZIP KOmptions Contained blure shall have the	same legal effect	as if mede under	oath: that I	rilly that the i	nformation or director
TIFLE MAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicates	d on this moor	or supplemental report i	h this filing does not que	filtinum sifty for the existence of that my signal aport as required.	LE ME EET ADDRESS Y-S1-ZIP KOmptions Contained blure shall have the	same legal effect 7, Florida Statutes	as if made under it and that my nam	oath; that I e appears	rifly that the it am an officer in Block 10 or	nformation or director