

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000024532

FILED
Jun 15, 2009
Secretary of State

Entity Name: MACHINED PERFECTION, INC.

Current Principal Place of Business:

4950 B CRESCENT TECHNICAL COURT
ST AUGUSTINE, FL 32086

New Principal Place of Business:

3977 SEA EAGLE CIR.
ST AUGUSTINE, FL 32086

Current Mailing Address:

MACHINED PERFECTION, INC.
3977 SEA EAGLE CIR.
SAINT AUGUSTINE, FL 32086

New Mailing Address:

FEI Number: 51-0627060 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

HALLER, MICHAEL
3977 SEA EAGLE CIRCLE
ST AUGUSTINE, FL 32086 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HALLER, MICHAEL
Address: 3977 SEA EAGLE CIRCLE CAL COURT
City-St-Zip: ST AUGUSTINE, FL 32086

Title: S () Delete
Name: HALLER, NATALIE
Address: 3977 SEA EAGLE CIRCLE CAL COURT
City-St-Zip: ST AUGUSTINE, FL 32086

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: MICHAEL HALLER

P

06/15/2009

Electronic Signature of Signing Officer or Director

_____ Date