2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

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DOCUMENT # P95000040652

1. Entity Name

NORTON TOOLS, CORP.



Principal Place of Business

2103 WEST 76TH STREET

UNIT #28 HIALEAH, FL 33016 Mailing Address

2103 WEST 76TH STREET UNIT #28

HIALEAH, FL 33016

FILED Apr 28, 2004 08:00 AM Secretary of State



04072004

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0557841 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GALLEGO, NORTON 2103 WEST 76TH STREET **UNIT #28** HIALEAH, FL 33016

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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 tamiliar with, and accept
	the obligations of registered agent.	

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable,

(NOTE, Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

U00000135520 04/28/04-80063-803 150.88

10. OFFICERS AND DIRECTORS TITLE GALLEGO, NORTON MAME 471 NW 156 LANE STREET ADDRESS CITY - ST - ZIP PEMBROKE PINES, FL 33028 MARKE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X4-26-04 x (305) 8281445

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