

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000089915

Entity Name: PAROW INDUSTRIES, INC.

FILED
Aug 22, 2007
Secretary of State

Current Principal Place of Business:

1019 LEATHER FERN LANE
MIMS, FL 32754

New Principal Place of Business:

Current Mailing Address:

1019 LEATHER FERN LANE
MIMS, FL 32754

New Mailing Address:

FEI Number: 59-3428864

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAROW, DANIEL F
1019 LEATHER FERN LANE
MIMS, FL 32754 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: T () Delete
Name: PAROW, JUDITH A
Address: 1019 LEATHER FERN LANE
City-St-Zip: MIMS, FL 32754

Title: P () Delete
Name: PAROW, DANIEL F P
Address: 1019 LEATHER FERN LANE
City-St-Zip: MIMS, FL 32754

Title: VP () Delete
Name: PAROW, GEORGE V V PRES
Address: 2490 BAY BERRY DR
City-St-Zip: CLEARWATER, FL 33763

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DIR () Change (X) Addition
Name: PHILLIPS, FRANK A DIR
Address: 1049 LEATHER FERN LANE
City-St-Zip: MIMS, FL 32754

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: DANIEL F PAROW

PRES

08/22/2007

Electronic Signature of Signing Officer or Director

_____ Date