2004 FOR PROFIT CORPORATIO ANNUAL REPORT	N	FILED Apr 14, 2004. 08:00 AM.
DOCUMENT # P99000054285 1. Entity Name DURCO FORMING CORP.		Secretary of State
Principal Place of Business Mailing Address 7800 W OAKLAND PARK BLVD BLDG G SUNRISE, FL 33351 F,	BLDG G	
DO NOT WRITE IN THIS SPA	CE	02192004 No Chg-P CR2E034 (10/03)
		4. FEI Number Applied For 65-0941174 Not Applicable 5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent JOVANOVIC, DOUGLAS 17 SE 24 AVE POMPANO BEACH, FL 33062		DO NOT WRITE IN THIS SPACE
 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		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution.	ncing \$5.	00 мау Ве II 00000112855 Id to Fees 04/14/04-80038-013 150.00
10. OFFICERS AND DIRECTORS TITLE PD NAME DURAND, YVAN STREET ADDRESS 7800 W OAKLAND PARK BLVD BLDG G CITY-ST-ZIP SUNRISE, FL 33351 TITLE VSTD NAME DURAND, MICHEL STREET ADDRESS 7800 W OAKLAND PARK BLVD BLDG G CITY-ST-ZIP SUNRISE, FL 33351 TITLE VSTD NAME DURAND, MICHEL STREET ADDRESS 7800 W OAKLAND PARK BLVD BLDG G CITY-ST-ZIP SUNRISE, FL 33351 TITLE V		
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST- ZIP TITLE		
NAME STREET ADDRESS CITY-ST-ZIP 12. Lhereby certify that the information supplied with this filing does not qualify for the exer	nption stated in Sec	tion 119.07(3)(i), Florida Statutes. I further certify that the information
 I hereby certify that the information supplied with this filing does not qualify for the exerind indicated on this report or supplemental report is true and accurate and that my signate of the corporation or the receiver or trustee empowered to execute this report as require changed, or on an attachment with an address, with an other like empowered. SIGNATURE:		ame legal effect as if made under oath; that I am an officer or director Florida Statutes, and that my name appears in Block 10 or Block 11 if 64 - 08 - 64
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT	OR	