## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 16, 2007 08:00 A Secretary of State DOCUMENT # V72831 1. Entity Name GENERAL CORDAGE, INC. Principal Place of Business Mailing Address 2611 S. 82ND STREET 2611 S. 82ND STREET TAMPA, FL 33619 US TAMPA, FL 33619 02142007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 62-1511205 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent ESLICK, WALLACE L. DO NOT WRITE 2611 S. 82ND STREET TAMPA, FL 33619 IN THIS SPACE 9. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent aignature required when reinstating) U000000710628 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 04/25/07-80051-002 (50.An Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ESLICK, WALLACE L NAME 2611 S. 9\82ND ST. STREET ADDRESS CITY-ST-ZIP TAMPA, FL 33619 TITLE NAME ESLICK, RITA G > STREET ADDRESS P.O. BOX 89265 CITY-ST-ZIP TAMPA, FL 33689 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE 1 NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the sorporation 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 en an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

04-12-07

813 - 650 -1186

FILED

Date

Daytima Phone #