


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P94000025313

1. Entity Name
ROBOCOM, INC.



Principal Place of Business Mailing Address

52 QUEEN CT 52 QUEEN CT
 LEHIGH ACRES, FL 33971-2303 US LEHIGH ACRES, FL 33971-2303 US

DO NOT WRITE IN THIS SPACE



01242006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0480622 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

KEE, THOMAS R
 52 QUEEN CT.
 LEHIGH ACRES, FL 33971-2303

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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 familiar with, and accept the obligations of registered agent.

SIGNATURE: *Thomas R. Kee, Director* DATE: 1-24-06

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	KEE, THOMAS R
STREET ADDRESS	52 QUEEN CT.
CITY-ST-ZIP	LEHIGH ACRES, FL 339712303
TITLE	D
NAME	KEE, ELIZABETH A
STREET ADDRESS	52 QUEEN COURT
CITY-ST-ZIP	LEHIGH ACRES, FL 339712303
TITLE	D
NAME	KEE, JAMES C
STREET ADDRESS	52 QUEEN COURT
CITY-ST-ZIP	LEHIGH ACRES, FL 339712303
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100000406269
 02/07/06-80069-016 150.00

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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 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: *James C. Kee* James C. Kee DATE: 1-24-06 DAYTIME PHONE: 239-369-899

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #