2006 FOR PROFIT CORPORATION ANNUAL REPORT

Aug 14, 2006 8:00 am Secretary of State **DOCUMENT # P97000070825** 1. Entity Name 08-14-2006 90038 008 ***150.00 RESTAURANT EQUIPMENT MAINTENANCE MANAGEMENT, INC. Principal Place of Business Mailing Address 10702 HOOD RD. S P.O. BOX 23882 JACKSONVILLE, FLC 32223 JACKSONVILLE, FL 32223 2. Principal Place of Business 3. Mailing Address P. O - BoX 23882 Suite, Apt. #, etc. Suite, Apt. #, etc. 08082006 CR2E034 (11/05) Chg-P #4 City & State City & State 4. FEI Number Applied For acksonville Ksonville 59-3463270 Not Applicable Country \$8.75 Additional 15 A-()5A 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent DALEY, ZIANET C Street Address (P.O. Box Number is Not Acceptable) 2831 LAKE VISTA RD. JACKSONVILLE, FL 32223 City Zip Code 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition DALEY, THOMAS F NAME NAME STREET ADDRESS 2831 LAKE VISTA RD. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32223 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME DALEY, ZIANET C NAME STREET ADDRESS 2831 LAKE VISTA RD. STREET ADDRESS CITY-ST-ZIP JACKSONVILLE, FL 32223 CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filting 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. 904-260-0857

FILED



ATTACHMENT

Restaurant Equipment Maintenance Mmgt. Inc.

DATE: 08-08-2006

P.O. BOX 23882 JACKSONVILLE, FL. 32241 PHONE# 904-260-0857 FAX# 904-292-2030

E-MAIL= remminc@comcast.net

TO: FLORIDA DEPARTMENT OF STATE / DIVISION OF CORPORATIONS

FROM: THOMAS DALEY / PRESIDENT

SUBJ: CORPORATION ANNUAL REPORT

WITH THIS LETTER I WOULD LIKE TO NOTIFIED THE FLORIDA DEPARTMENT OF STATE THAT OUR ADDRESS WAS INCORRECT AND WE DIDN'T RECEIVE A RENEWAL NOTICE, ENCLOSED IS OUR CORRECT ADDRESS AND OUR CHECK FOR \$150.00 THANK YOU

SINCERELY,

ZIANET DALEY / VICE PRESIDENT