2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 23, 2007 08:00 AM Secretary of State

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DOCUMENT # 267355					3	ecretary of Sta
	RS TRADE SHOP, INC.					
Deinning I Ding		Mailian Address	SPO WILL			
Principal Place of Business Mailing Address 26 PALAFOX PLACE 26 PALAFOX PLACE						
		PENSACOLA, FL 32502				
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r	O NOT WRITE	N THIS SDA	CE	03092007	No Chg-P	CR2E034 (11/05)
-	O MOL WITH	IN THIS SEA		4. FEI Numbe 59-099		Applied For Not Applicable
		en de la companya de La companya de la co]	of Status Desired	\$8.75 Additional
	6. Name and Address of Current Reg	istered Agent	T	1		Fee Required
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
DAVIS, CORBETT A JR 26 PALAFOX PLACE				, DO	NOT W	RITE
	DLA, FL 32502			IN T	THIS SP	ΔCF
9 The shows	named entity submits this statement for the	·	rod office or register	ad agent or bei	n in the Cinte of Ele	ida Jem familiar with and accent
	tions of registered agent.	a borbose or crianding its register	ad onice of register	ed agent, or bot	in, in the state of his	ilida. Tani laminai wini, and accept
SIGNATURE.					 	
	Signature, typed or printed name of registered agent and t	tte il applicable. (NOTE: Registeri	ed Ageni signature required	when reinstating)		DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Fina Trust Fund Contribution		.00 May Be ed to Fees	000000 -03/30/07)676044 -80043-011 150.00
10.	OFFICERS AND DIF	ECTORS	- 化制造操作		The state of the state of	No. 2 mar 2 miles
TITLE NAME	P DAVIS, CORBETT A JR					
STREET ADDRESS	1450 TROPICAL FLAMINGO			And the second second		
CITY+ST-ZIP	GULF BREEZE, FL 32563					
TITLE	ST BAVIO BRADIEVALOR					
NAME STREET ADDRESS	DAVIS, BRADLEY N SR 2924 CORAL STRIP PKWY			Property of the second		
CITY-ST-ZIP	GULF BREEZE, FL 32563					
TITLE	V CTOLTHAN IOUND]		,	1 Y
NAME STREET ADDRESS	STOLTMAN, JOHN P 301 GREGG AVENUE					•
CITY-ST-ZIP	MILTON, FL 32571		1.68 3.75 7	· PO	NOT W	RILE
TITLE				IN 7	THIS SP	ACE
NAME STREET ADDRESS			Friday.		1880年1986年	
CITY-ST-ZIP					A STATE OF THE STA	
TITLE						
NAME CTREET ANDRESS					W. Carlotte	
STREET ADDRESS	1		10.13	Section 1		THE THE PARTY OF T

12. I hereby certify that the information supplied with this filling 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: X

THILE

STREET ADDRESS CITY-ST-ZIP

IATORE AND TYPED OR PRINTED JAME OF SIGNING OFFICER OR DIRECTO

850-432-4433