2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)** 

## Feb 28, 2005 08:00 AM **DOCUMENT # 471218** Secretary of State 1. Entity Name CHARLES RAPP ENTERPRISES, INC. OF FLORIDA Mailing Address Principal Place of Business 10775 SANTA LAGUNA DR. 10775 SANTA LAGUNA DR. **BOCA RATON FL 33428 BOCA RATON FL 33428** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 1st MOORE CR2E034 (10/04) 4. FEI Number Applied For City & State City & State 59-1578469 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RAPP, HOWARD Street Address (P.O. Box Number is Not Acceptable) 10775 SANTA LAGUNA DR. **BOCA RATON FL 33428** Zip Code City 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 FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. ☐ Change VD ☐ Delete Mili ☐ Addition 11111 1/00000245204 RAPP, HOWARD NAMA NAME 02/28/05-80017-001 150.00 STREET ADDRESS 10775 SANTA LAGUNA DR. JIREEL ADDRESS CITY-ST-ZIP **BOCA RATON FL 33428** U17-\$1-2P ☐ Delete TITLE ☐ Change Addition HILL HAME GRAHAM, ARNOLD 10711 BEXLEY BLVD TREET ADDRESS STREET ADDRESS **BOCA RATON FL 33428** (11Y-S1-20) CITY ST-7(P ☐ Delete ☐ Change ☐ Addition dille HILL NAME MARKE STREET ADDRESS STREET ADDRESS CHY-ST-7III CITY-SI-ZIP Change ☐ Addition HILE ☐ Delete Tille MAME NAME TIREET ADDRESS SUPERT ADDRESS CITY-ST-ZIP CHY-ST-ZIP Change Addition Addition ☐ Delete HILE 1551 6 NAME NAME STREET ADORESS STREET ADDRESS (47-S1-ZP CHY-SI- AP ☐ Change ☐ Addition ☐ Delete billi HILL MANE NAME STREET ADDRESS STREET APORESS CITY-ST-ZIF CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Misles 561-883-7760

FILED