

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90038 046 ***150.00

DOCUMENT # G27229	
1. Entity Name MELBOURNE RADIATOR, INC.	

Principal Place of Business 1124 W NEW HAVEN AVE WEST MELBOURNE, FL 32904 US	Mailing Address 1124 W NEW HAVEN AVE W MELBOURNE, FL 32904 US
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01202006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2299233	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

NARMORE, DONNIE R.
 1124 W NEW HAVEN AVE
 WEST MELBOURNE, FL 32904

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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 _____ DATE _____
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 NAME STREET ADDRESS CITY-ST-ZIP	PSTD NARMORE, DONNIE 1124 W NEW HAVEN AVE WEST MELBOURNE, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD NARMORE, CURTIS 1124 W NEW HAVEN AVE WEST MELBOURNE, FL 32904
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: Donnie Narmore 1-20-06 ³²¹⁻⁷²⁵⁻³¹²⁰
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #