

**2006 FOR PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # G70457

1. Entity Name
RUBBER APPLICATIONS INTERNATIONAL, INC.



Principal Place of Business
**610 INDUSTRIAL PARK RD.
 P.O. BOX 1015
 MULBERRY, FL 33860**

Mailing Address
**610 INDUSTRIAL PARK RD.
 P.O. BOX 1015
 MULBERRY, FL 33860**



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number **59-2339560** Applied For
 Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**HOBBY, STANLEY A
 610 INDUSTRIAL PARK ROAD
 MULBERRY, FL 33860**

**DO NOT WRITE
 IN THIS SPACE**

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 filer 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**

UN00001416477
 02/13/06-80018-007 150.00

10. OFFICERS AND DIRECTORS

NAME: PD
 HOBBY, STANLEY
 ADDRESS: 1121 S. WIGGINS ROAD
 -ST- ZIP: PLANT CITY, FL

NAME: VD
 BASHLOR, RONNIE S
 ADDRESS: 6274 FORESTWOOD DR
 -ZIP: LAKELAND, FL

NAME: VD
 POLK, L V
 ADDRESS: 4555 EWELL ROAD
 LAKELAND, FL

NAME: ST
 RAYBURN, AMY
 ADDRESS: 1003 S TEAKWOOD DR
 PLANT CITY, FL 33567

**DO NOT WRITE
 IN THIS SPACE**

I 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 in 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 an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Stanley Hobby

Date

2/2/06

Daytime Phone #

813-425-5127