

**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

OFFICER	PD
NAME	HOBBY, STANLEY
STREET ADDRESS	1121 S. WIGGINS ROAD
CITY-STATE-ZIP	PLANT CITY, FL
OFFICER	VD
NAME	BASHLOR, RONNIE S
STREET ADDRESS	6274 FORESTWOOD DR
CITY-STATE-ZIP	LAKELAND, FL
OFFICER	VD
NAME	POLK, L V
STREET ADDRESS	4555 EWELL ROAD
CITY-STATE-ZIP	LAKELAND, FL
OFFICER	ST
NAME	RAYBURN, AMY
STREET ADDRESS	1003 S TEAKWOOD DR
CITY-STATE-ZIP	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