


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 14, 2004 8:00 am**  
**Secretary of State**

01-14-2004 90010 039 \*\*\*150.00

<b>DOCUMENT # K98223</b>	
1. Entity Name <b>REPUBLIC ENG. SERVICE, INC.</b>	

Principal Place of Business <b>770 TALLEYRAND AVE. JACKSONVILLE, FL 32202</b>	Mailing Address <b>770 TALLEYRAND AVE. JACKSONVILLE, FL 32202</b>
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



01082004 Chg-P CR2E034 (10/03)

4. FEI Number <b>59-2957242</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent	
<b>BUSCHMAN, ALBERT E JR 2215 SOUTH 3RD ST STE 401 JACKSONVILLE BCH, FL 32250</b>	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
<b>FL</b>	Zip Code

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

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	DP <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WERNER, WENZEL T. JR.</b>	NAME	
STREET ADDRESS	<b>11904 BETULA ROAD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL</b>	CITY-ST-ZIP	
TITLE	VS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>CONARD, JACK L</b>	NAME	
STREET ADDRESS	<b>11912 BETULA RD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL</b>	CITY-ST-ZIP	
TITLE	TS <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>QUATTLEBAUM, RUBY L</b>	NAME	
STREET ADDRESS	<b>11904 BETULA RD</b>	STREET ADDRESS	
CITY-ST-ZIP	<b>JACKSONVILLE, FL</b>	CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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.	
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SIGNATURE: <u>Wenzel T. Werner Jr.</u>	Date: <u>1/13/04</u>	Daytime Phone #: <u>904-354-6007</u>
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