2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 23, 2006 08:00 AM **Secretary of State**

DOCUMENT	#K98223	_
1 Entitu Marsa		

REPUBLIC ENG. SERVICE, INC.



Principal Place of Business

Mailing Address

770 TALLEYRAND AVE. IACKSONVILLE, FL 32202 770 TALLEYRAND AVE. JACKSONVILLE, FL 32202

|--|--|--|--|--|--|

CR2E034 (11/05)

Fee Required

DO NOT WRITE IN THIS SPACE

\$8.7	5 Additional
{	Not Applicable
1	Applied For
	S8.7

6. Name and Address of Current Registered Agent

BUSCHMAN, ALBERT E JR 2215 SOUTH 3RD ST STE 101 JACKSONVILLE BCH, FL 32250

STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

No Chg-P

02052006

	named entity submits this statement for the pions of registered agent.	urpose of changing its registered of	ittice or o	registered agent, or bot	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title if	applicable. (NOTE Registered Ag	ent signatur	cequired when reinstating)	DATE
FIL After M	E NOW!!! FEE 18 \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Financin Trust Fund Contribution.	9 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECT	TORS			
itile Name Street address City-St-Zip	DP WERNER, WENZEL T. JR. 11904 BETULA ROAD JACKSONVILLE, FL				U00000443754 03/06/06-80025-009 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS CONARD, JACK L 11912 BETULA RD JACKSONVILLE, FL				
nme Name Sinelt address City-St-Zip	T QUATTLEBAUM, RUBY L 11904 BETULA RD JACKSONVILLE, FL			DO	NOT WRITE
title Name Street address City-St-Zip				IN T	THIS SPACE
TITLE NAME STREET ADDRESS CITY • ST • ZIP					
TITLE NAME					

12. I hereby certify that the information supplied with this liling 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 trustoe empowered to execute this report as required by Chapter 507, 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.

RUBY L. QUATTLEBAUM 02/20/06 (904) 354-6007
AD OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Deto Destroy Phone #