## FOR PROFIT CORPORATION

UNIFORM BU	SINESS REPORT	(UBR)	
DOCUMENT # P0000 1. Indiginate RHODYS HAULING, INC			05 FEB 10 AM II: 46 SECKLIANT OF STATE TALLAHASSEE, FLORIDA
DO NOT W	RITE IN THIS SI	PACE	
2. Principal Phase of Business 3. Mailing Address 16329 Caldwell Lane Post Office Box		883	REINSTATEMENT 0405
Suite, Apt. 4, etc.	Suite, Apt. V. etc.		20 DO NOT WHITE IN THIS SPACE
City & State Brooksville, Florida	City & State Hudson, Florida		4. FEI Number 59-3683540 Applied For   Not Appli
256 Courary 34610	34674	Country	5. Cartificate of Status Desired
114 12 12 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	The second secon	y a film of	7, Name and Address of Current Registered Agent
A CONTROL OF THE CONT	Special control of the control of th		GEL & UTRERA, P.A.
Gradulin i servici di professioni di Professioni di Professioni di Professioni di Professioni di Professioni di	TWRITE	Street Address	(P.O. Box Number is Nat Acceptable)
INTHI	SSPACE	1840 SW 2	22nd Street, 4th Floor
The second secon	a constituent of the second of	Cily Miami	FL Zic Code 33145 area agent, or both, in the State of Florida, I am familiar with, and accept
Jarnary 1: May 1 Fee Is \$ After May 1 Fee Is \$550	20 2 20 00 apred una 198 d'apre cuarle. (NO: 150:00 apred una 198 d'apred	alia Utrera, Vice Pro	
Amended UBR is \$61. Make Check Payable to Florida Dep	artment of State		TOST TO CONTROL OF THE ACT OF THE
PSTD Eddie R. Sellers	ane, Brooksville, FL 34610	NAME SINGTADDICSS-	
PINUE NAME SOULH ANNERS UNY-ST-ZIP		NAME STREET ADDRESS CITY STEAM	
STRE NAME STREET ADDRESS ONY-SY-ZIP	·	NAME STREET ADDRESS CITY-ST-2P	DO NOT WRITE
THUE MAME SHEET ADDRESS CHY-ST- AP		NAME NAME STREET ACTIFIESS	IN THIS SPACE
ITIE NAME STREET AMNESSS CITY-ST-EF		SAME SAME SAMET ADDRESS COPY ST-ZIP	
MU	10 WANTER (ASSESSMENT)	True de la company	AND THE PROPERTY OF THE PROPER

12. I hereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(3)(i), Florids 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 lagal effect as it made under each; that I am an effect or director of the corporation or they ecower or musice empowered to execute this report as required by Chapter 607. Florids Statutes; and that my name supplies in Stock 10 or on an amacurate with an adoptes, with all cities the empowered.

NAME:

STREET ADDRESSE

CITY: ST: DP

MATAE

STREET ADDRESS

0174-31-216

EQUIC IN. Eddie R. Sellers

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## AFFIDAVIT IN SUPPORT OF REQUEST TO WAIVE THE FLORIDA DEPARTMENT OF STATE CORPORATE REINSTATEMENT FEES

STAIL	E OF FI	LORIDA	•		
COUN	TY OF				
l. (herein		R. Scilers is the President of RHO orporation").	DYS HAULING, INC., a Florida corporation.		
2. 2004,	That the Corporation was administratively dissolved by the Florida Department of State on 1 October				
3. Report		ne Corporation failed to file its 2004, 2 see within the time prescribed by Florida	005 Annual Report or pay the 2004, 2005 Annual Statutes Chapter 607 because:		
	3.1		filing the Annual Report and pay the Annual ent of State was never received by the		
	3.2		by the Corporation or its Registered Agent State was commencing a procedure to tion.		
	nt by the		tment of State reinstate the Corporation upon the Report fees and the filing of its 2004, 2005 Annual Affidavit.		
5.	RHODYS HAULING, INC. satisfies the requirements of the Florida Statutes 607.0401.				
6.	No further ground or grounds exist for the administrative dissolution of the Corporation.				
Dated:	8	day of <u>FEB</u> , 2005			
FURTHER, AFFIANT SAYETH NOT					
			RHODYS HAULING, INC.		
			By: Eddie R. Sellers, President		
			before me this day of J. Spradlin 2005  Notary Printed N. Bonding Co., Inc.  Commission Expires: Mr Bonding Co., Inc.		