## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

## **FILED** Apr 01, 2005 08:00 AM Secretary of State DOCUMENT # P01000017160 1. Entity Name RAPID ROOTER SEWER & DRAIN SERVICE, INC. Principal Place of Business Mailing Address 25 NE 5TH STREET 25 NE 5TH STREET POMPANO BEACH, FL 33060 POMPANO BEACH, FL 33060 No Chg-P CR2E034 (10/03) 03092005 DO NOT WRITE IN THIS SPACE Applied For 4. FE! Number 65-1081924 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HCRM CORP DO NOT WRITE 2200 CORPORATE BLVD NW, STE 401 BOCA RATON, FL 33431 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. registored agent and title if applicable (NOTE, Registered Agent signature required when reinstaling) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 **\$5.00** May Be П Trust Fund Contribution. Added to Fees 10, OFFICERS AND DIRECTORS TITLE RICE, DONALD E NAME STREET ADDRESS 25 NE 5TH STREET U00000283152 CITY-ST-ZIP POMPANO BEACH, FL 33060 04/01/05-80016-008 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 suppliemental report is true and accourage and that my signature shall have the same legal effect as if made under eath; 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 attachmient with an address, with all other like empowered.

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR