

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000103023

Entity Name: RUDOLPH AND ME, INC.

FILED  
Apr 26, 2006  
Secretary of State

**Current Principal Place of Business:**

7205 24TH COURT EAST  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

7205 24TH COURT EAST  
SARASOTA, FL 34243

**New Mailing Address:**

FEI Number: 65-1150359

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BRIELMANN, SUSAN  
6864 ARECA BLVD  
SARASOTA, FL 34241 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BRIELMANN, JOSEPH  
Address: 6864 ARECA BLVD  
City-St-Zip: SARASOTA, FL 34241

Title: V ( ) Delete  
Name: BRIELMANN, SUSAN  
Address: 6864 ARECA BLVD  
City-St-Zip: SARASOTA, FL 34241

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH BRIELMANN

PRES

04/26/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date