2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 27, 2005 08:00 AM Secretary of State DOCUMENT # P02000007353 1. Entity Name ROB REESE ENTERPRISES, INC. Principal Place of Business Mailing Address 5600-90 AVE. NORTH 5600-90 AVE. NORTH PINELLAS PARK, FL 33782 PINELLAS PARK, FL 33782 No Chg-P 01252005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FE) Number 30-0042031 Not Applicable **\$8.75** Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent ZEOLI, SEBASTIAN JR. DO NOT WRITE 10707-66 STREET NORTH, STE. 9 PINELLAS PARK, FL 33782 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 lamiliar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and tide if applicable. (NOTE Registered Agent signature required when reinstalling) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS PSTD TITLE REESE, ROBERT R NAME 5600-90 AVE. NORTH STREET ADDRESS -- - U00000334164 04/27/05-80035-005 150.00 PINELLAS PARK, FL 33782 CITY - ST - ZIP TITLE NAME STREET ADDRESS CATY - ST - ZAP 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 ACCRESS 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.

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

722-804-3436