


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 26, 2007 8:00 am
Secretary of State

03-26-2007 90058 010 ***150.00

DOCUMENT # P02000034142	
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1. Entity Name RV'S R US, INC.	Principal Place of Business 6160 115TH PLACE N. SEMINOLE, FL 33772	Mailing Address 6160 115TH PLACE N. SEMINOLE, FL 33772
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2. Principal Place of Business - No P.O. Box # 6727 126TH AVENUE NO.	3. Mailing Address 6727 126TH AVENUE NORTH
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State LARGO FL	City & State LARGO FL
Zip 33773	Country PINELLAS

01192007 Chg-P CR2E034 (12/06)

4. FEI Number 47-0858797	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent SIEGEL, JOSEPH 6160 115TH PLACE N. SEMINOLE, FL 33772	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIEGEL, JOSEPH 6160 115TH PLACE N. SEMINOLE, FL 33772 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing 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 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.

SIGNATURE: Joseph Siegel - JOSEPH SIEGEL **3/22/07 737-507-3166**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #