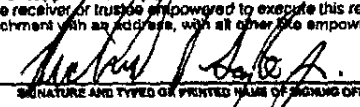


FILED**Apr 18, 2005 08:00 AM**
Secretary of State**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P02000065352			
1. Entity Name R & R SCREEN, INC.			
Principal Place of Business 10025 ALLEN RD. LITHIA, FL 33547		Mailing Address PO BOX 947 LITHIA, FL 33547	
DO NOT WRITE IN THIS SPACE			
		04142005 No Chg-P CR2E034 (10/03)	
4. FEI Number 01-0881719		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAJKO, RICHARD 10025 ALLEN RD LITHIA, FL 33547		DO NOT WRITE 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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when releasing) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		1000000911580 04/18/05-80050-016 150.00	
10. OFFICERS AND DIRECTORS			
TITLE	P		
NAME	SAJKO, RICHARD P JR		
STREET ADDRESS	10025 ALLEN RD.		
CITY- ST- ZIP	LITHIA, FL 33547		
TITLE	VP		
NAME	COLLING, RYAN		
STREET ADDRESS	5217 LITHA PINECREST RD.		
CITY- ST- ZIP	LITHIA, FL 33547		
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
CITY- ST- ZIP			
TITLE			
NAME			
STREET ADDRESS			
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 fee empowered.			
SIGNATURE: 		4-15-05 815-716-1297 815-716-0346	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	