

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000098354

Entity Name: RAECO METAL SPECIALTIES, INC.

FILED
Jan 03, 2007
Secretary of State

Current Principal Place of Business:

3977 SW 89TH AVE
OCALA, FL 34474

New Principal Place of Business:

3927 SW 89TH AVE
OCALA, FL 34481

Current Mailing Address:

3977 SW 89TH AVE
OCALA, FL 34474

New Mailing Address:

3927 SW 89TH AVE
OCALA, FL 34481

FEI Number: 61-1425174

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHAD, MARK
3977 SW 89TH AVE
OCALA, FL 34474 US

Name and Address of New Registered Agent:

SCHAD, MARK
3927 SW 89TH AVE
OCALA, FL 34481 US

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: _____

01/03/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHAD, MARK
Address: 3977 SW 89TH AVE
City-St-Zip: OCALA, FL 34474

Title: VPST () Delete
Name: BETTENHAUSEN, KAREN
Address: PO BOX 5064
City-St-Zip: OCALA, FL 34478

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: MARK SCHAD

P

01/03/2007

Electronic Signature of Signing Officer or Director

Date