

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 11, 2006 8:00 am
Secretary of State

05-11-2006 90248 015 ***150.00

DOCUMENT # P02000124074

1. Entity Name
DRAIN ALERT PRODUCTS, INC.



Principal Place of Business
**4217 E. 98TH AVE
TAMPA, FL 33617 US**

Mailing Address
**4217 E. 98TH AVE
TAMPA, FL 33617 US**



04242006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
74-3069485

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HERNANDEZ, RODOLFO SR
4217 E. 98TH AVE
TAMPA, FL 33617**

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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 *Rodolfo Hernandez Sr.*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/29/06

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	HERNANDEZ, RODOLFO SR
STREET ADDRESS	4217 E. 98TH AVE
CITY-ST-ZIP	TAMPA, FL 33617
TITLE	VP
NAME	HERNANDEZ, LIBRADA
STREET ADDRESS	4217 E. 98TH AVE
CITY-ST-ZIP	TAMPA, FL 33617
TITLE	S,T
NAME	HERNANDEZ, RODOLFO JR
STREET ADDRESS	3808 W. GRANADA ST.
CITY-ST-ZIP	TAMPA, FL 33629
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Rodolfo Hernandez Sr.*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-06 *813 989-9007*
Date Daytime Phone #