


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2007 8:00 am
Secretary of State

03-19-2007 90085 008 ***150.00

DOCUMENT # P03000018846					
1. Entity Name TEXAS ROOTER CORPORATION					
Principal Place of Business 500 N. CONGRESS AVE SUITE 90 WEST PALM BEACH, FL 33401			Mailing Address 500 N. CONGRESS AVE SUITE 90 WEST PALM BEACH, FL 33401		
2. Principal Place of Business - No P.O. Box # 6387 So. Mangrove Cay Way		3. Mailing Address Suite, Apt. #, etc.			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State LANTANA, FL		City & State		4. FEI Number 56-2325834	
Zip 33462		Country US		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				02232007 Chg-P CR2E034 (12/06)	
6. Name and Address of Current Registered Agent MANSANALEZ, BALDEMAR 500 N. CONGRESS AVE SUITE 90 WEST PALM BEACH, FL 33401			7. Name and Address of New Registered Agent Name: MANSANALEZ, BALDEMAR Street Address (P.O. Box Number is Not Acceptable): 6387 So. Mangrove Cay Way City: LANTANA FL Zip Code: 33462		
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 reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PVST MANSANALEZ, BALDEMAR 1897 CYNMAR DRIVE WEST PALM BEACH, FL 33409	<input type="checkbox"/> Delete			
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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 of 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: _____ 03/14/07					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					