## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000039902

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FILED Jul 11, 2005 Secretary of State

| Entity Nar  | me: R&SMO   | BILE ENTERPRISES, INC.  |               |   |   |  |
|---|---|---|---------------|---|---|--|
| Current Principal Place of Business:                                  |   |   |               | New Principal Place of Business:  |   |  |
| 25191 E. OLYMPIA AVE.<br>PUNTA GORDA, FL 33950                        |   |   |               | 1107 W. MARION AVENUE<br>SUITE 112<br>PUNTA GORDA, FL 33950                     |   |  |
| Current Mailing Address:  |   |   |               | New Mailing Address:  |   |  |
| SUITE 206   | OLYMPIA AVE.<br>S<br>ORDA, FL 339                     | 50  |               | 1107 W. MARION AV<br>SUITE 112<br>PUNTA GORDA, FL                               |   |  |
| FEI Number:   | : 01-0776059  | FEI Number Applied For ( )  | FEI Num       | nber Not Applicable ( )   | Certificate of Status Desired ( )       |  |
| Name and Address of Current Registered Agent:                         |   |   |               | Name and Address of New Registered Agent:                                       |   |  |
| SULLIVAN, PAUL D<br>25191 E. OLYMPIA AVE.<br>PUNTA GORDA, FL 33950 US |   |   |               | FILEMAN, GARY T<br>1107 W. MARION AVE.<br>SUITE 112<br>PUNTA GORDA, FL 33950 US |   |  |
|   | named entity s<br>e of Florida.                       | ubmits this statement for the                                       | purpose of    | f changing its registere  | ed office or registered agent, or both, |  |
| SIGNATURE: GARY T. FILEMAN  |   |   |               |   | 07/11/2005                              |  |
|   | Electron  | c Signature of Registered Ag  | jent          |   | Date                                    |  |
|   |   | (2)(b), F.S., the corporation did n<br>Trust Fund Contribution ( ). | ot receive tl | he prior notice.  |   |  |
| OFFICERS AND DIRECTORS:   |   |   |               | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:                                    |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                           | D ()<br>BELILES, KAY<br>451 NORMA CC<br>PUNTA GORDA   |   |               | Title:<br>Name:<br>Address:<br>City-St-Zip:                                     | () Change () Addition                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:                           | D ()<br>MACQUEEN, RE<br>3906 CANYON I<br>LAKELAND, FL | AKE POINT   |               | Title:<br>Name:<br>Address:<br>City-St-Zip:                                     | () Change () Addition                   |  |

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KAY BELILES 07/11/2005 D