FOR PROFIT CORPORATION ANNUAL REPORT

06-18-2008 90001 049 ***150.00
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P03000082280

1. Entity Name
MPR Enterprises of Callahan Inc

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CR2E034B (5/07)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
541811 US Hwy 1	541811 US Hwy 1
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Callahan Fl	City & State: Callahan Fl
Zip: 32011 Country: United States of America	Zip: 32011 Country: United States of America

4. FEI Number: 59-8110040 ☐ Applied For ☒ Not Applicable

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

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7. Name and Address of Current Registered Agent

Name: Paul W Rewalt

Street Address (P.O. Box Number is Not Acceptable): 541811 US Hwy 1

City: Callahan FL Zip Code: 32011

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 _____ DATE
Signature, type or print name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended AR is $61.25
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	President
NAME	Paul W Rewalt
STREET ADDRESS	541811 US Hwy 1
CITY-ST-ZIP	Callahan, Fl 32011
TITLE	Vice President/S
NAME	Peggy Lee Garza
STREET ADDRESS	541811 US Hwy 1
CITY-ST-ZIP	Callahan, Fl 32011
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Paul W Rewalt 6-12-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

KS