

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000102359

FILED
Aug 24, 2006
Secretary of State

Entity Name: RELIABLE INTERPRETERS & TRANSLATORS, INC.

Current Principal Place of Business:

7512 FORDHAM CREEK LN
ORLANDO, FL 32818

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 680714
ORLANDO, FL 32868

New Mailing Address:

FEI Number: 54-2127069

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THERVIL, ERNST
7512 FORDHAM CREEK LN
ORLANDO, FL 32818 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THERVIL, ERNST
Address: 7512 FORDHAM CREEK LN
City-St-Zip: ORLANDO, FL 32818

Title: VP () Delete
Name: THERVIL, CARLINE
Address: 7512 FORDHAM CREEK LN
City-St-Zip: ORLANDO, FL 32818

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: ERNST THERVIL

P

08/24/2006

Electronic Signature of Signing Officer or Director

_____ Date