2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Mar 14, 2007 8:00 am DOCUMENT # P03000112687 Secretary of State 03-14-2007 90034 020 ***150.00 KEITH ROBINSON CARPENTRY, INC. Principal Place of Business Mailing Address 4181 FAVORITE RD. FT. PIERCE FL 34981 4181 FAVORITE RD. FT. PIERCE FL 34981 2. Principal Place of Business - No P.O. Box # 3. Mailing Address RŁ 4181 FAWRITE PN 4M FAUORHE Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State F7. Pierce City & State 4. FEI Number Applied For 81-0637905 FIA FT. Pietc Not Applicable ST LUCK 34981 Country \$8.75 Additional 5. Certificate of Status Desired STLucie Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo ROBINSON, KEITH A 4181 FAVORITE RD. Street Address (P.O. Box Number is Not Acceptable) FT. PIERCE FL 34981 Zip Code 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. 3-2-07 SIGNATURE KETTY KUSUNU Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee.Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. THE HILE vρ Addition ☐ Delete ☐ Change ROBINSON, KEITH A ROBINSON JEANNE NAME 4181 FAWEIRRE 4181 FAVORITE RD. STREET ADDRESS STREET ADDRESS FT. PIERCE FL 34981 CITY-S1-ZIP FI. PIERCE FIA 34981 CITY ST. ZIP HHC ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE TITLE ☐ Change Delete ☐ Addition *1*** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CHY-S1-ZIP TOTE ☐ Delete THE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIE CITY - ST - ZIP ☐ Delete ☐ Change ☐ Addition NAMI STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 000 ☐ Delete HILE ☐ Change ☐ Addition NAME NAME SIRLET ADDRESS STREET ADDRESS CITY+ST-ZIP CITY - ST - ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information

FILED

SIGNATURE: Keith Rebuson 3207 712 5505794

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DIRECTOR Date Dayling Phone #

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.