2006 FOR PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

FILED Jul 24, 2006 08:00 AM Secretary of State

DOCUMENT-#-P03000148451 1. Entity Name TRUST RALPH HOME REPAIR, INC.				Secretary of St		
Principal Place 649 MARLIN BAREFOOT B		Mailing Address 649 MARLIN CIRCLE BAREFOOT BAY, FL 32976			,	
			<u> </u>	07202006	No Chg-P CR2E034 (11/05)	
DO NOT WRITE IN THIS SPAC			CE	4. FEI Number Applied For Not Applicable 5. Certificate of Status Desired Status Desired Fee Required		
6. Name and Address of Current Registered Agent GROSS, RALPH 649 MARLIN CIRCLE BAREFOOT BAY, FL 32976 8. The above named entity submits this statement for the purpose of changing its registered the obligations of registered agent.				DO NOT WRITE IN THIS SPACE d office or registered agent, or both, in the State of Florida. I am familiar with, and accept		
SIGNATURE ROUGH Agent sind title population (NOTE: Registered Agent signature equired when renatating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the						
Due by September 6, 2006 Trust Fund				ded to Fees	corporation did not receive the prior notice.	
10. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSS, RALPH L JR. 649 MARLIN CIRCLE BAREFOOT BAY, FL 32976	DIRECTORS			V00000571990 07/25/06-80011-024 150.00	
NAME STREET ADDRESS CITY-ST-ZIP			<u> </u>			
NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY-ST-ZIP		**;		NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		· · · · · · · · · · · · · · · · · · ·			
TITLE NAME STREET ADDRESS						

12. Thereby 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 Block 11 if changed, or on an attachment with an address, with all other like empowered.