## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000016849

SEEWALD, JAY

PARKLAND, FL 33067

7700 E. UPPER RIDGE DRIVE

Name:

Address:

City-St-Zip:

Entity Name: RH SERVICES OF PALM BEACH, INC

FILED Apr 20, 2005 Secretary of State

	mer ranoer	VICEO OF TALINIBLATIN, IIVO				
Current Principal Place of Business:			New Princi	New Principal Place of Business:		
1009 N. STATE ROAD 7 ROYAL PALM BEACH, FL 33411  Current Mailing Address:				7450 W . BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33437  New Mailing Address:		
			New Mailir			
11711 OKEECHOBEE BLVD. ROYAL PALM BEACH, FL 33411				7450 W. BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33437		
FEI Number	: 20-0595757	FEI Number Applied For ( )	FEI Number Not Appli	cable ( ) Cert	ificate of Status Desired()	
Name and	Address of (	Current Registered Agent:	Name and	Name and Address of New Registered Agent:		
	D, JAY EECHOBEE B ALM BEACH, F		7450 W. BĆ	SEEWALD, JAY 7450 W. BOYNTON BEACH BLVD. BOYNTON BEACH, FL 33437 US		
	named entity e of Florida.	submits this statement for the	purpose of changing it	s registered office	or registered agent, or bo	th,
SIGNATUI	RE:			04/20/2005		
	Electro	nic Signature of Registered Ag	ent		Date	_
Election Car	mpaign Financin	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	SEEWALD, JA	R RIDGE DRIVE	Title: Name: Address: City-St-Zip:	()Chan	ge ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( MARGOLIS, LE 6379 N.W. 801 PARKLAND, FI	TH DRIVE	Title: Name: Address: City-St-Zip:	V (X) Chan MARGOLIS, LEE 6040 NW 96TH DRIV PARKLAND, FL 3307		
Title: Name: Address: City-St-Zip:	SEEWALD, JA	R RIDGE DRIVE	Title: Name: Address: City-St-Zip:	()Chan	ge ( ) Addition	
Title:	S (	) Delete	Title:	()Chan	ge ( ) 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.

Name:

Address:

City-St-Zip:

SIGNATURE: JAY SEEWALD PRES 04/20/2005