2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P04000025339 03-24-2005 90032 041 ***150.00 1. Entity Name EDUARDO RODRIGUEZ CLEAR AND FILL INC. Principal Place of Business Mailing Address 3600 POPLAR WAY 3600 POPLAR WAY NAPLES, FL 34112 -NAPLES, FL 34112 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03142005 CR2E034 (10/03) City & State 4. FEI Number 90-0168622 City & State Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Eduardo Rodriguez RODRIGUEZ, ENRIQUE J Street Address (P.O. Box Number is Not Acceptable) 3600 Poplar Way 1091 PANACEA BLVD APT 305 NORTH PORT, FL FL342-89 Zip Code 12 <u>Naples</u> 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. 3/8/05 SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOWIII FEE IS \$150.00 \$5.00 May Be \Box After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE P/V,ST. ■ Addition **Change** RODRIGUEZ, EDUARDO NAME NAME Eduardo Rodriguez STREET ADDRESS 3600 POPLAR WAY 3600 Poplar Way Naples, FL 34112 STREET ANDRESS CITY-ST-ZIP NAPLES, FL 34112 CITY-ST-7IP TITLE ☐ Delete ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TELLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CiTY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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

3/8/05

239-825-1540

FILED Mar 24, 2005 8:00 am