## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## FILED Jul 25, 2006 08:00 AM **DOCUMENT # P04000139976** Secretary of State ROGER CARPENTRY ENTERPRISES, INC. Mailing Address Principal Place of Business 26137 MILAGRO LN. P.O. BOX 366284 **BONITA SPRINGS, FL 34135 BONITA SPRINGS, FL 34136** 07052006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-1722062 Not Applicable \$8.75 Additional 5. Certificate of Status Desired M Fee Required 6. Name and Address of Current Registered Agent VARGAS, SANTIAGO DO NOT WRITE 21994 HWY. 60 E. LAKE WALES, FL 33898 IN THIS SPACE 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 U00000572313 <u>/25/06-800</u>26-001 150.00 the obligations of registered agent. SIGNATURE. Signature, typed or profed name of registered agent and little if applicable (NOTE: Registered Agent signature (soulred when reinstation) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 6, 2006 10. OFFICERS AND DIRECTORS TITLE NAME GARCIA, ROGER A 26137 MILAGRO LN. STREET ADORESS U00000572313 07/25/06-80026-002 8.75 BONITA SPRINGS, FL 34136 CITY-ST-ZIP TITLE NAME GARCIA, ROSILINDA STREET ADDRESS 26137 MILAGRO LN. BONITA SPRINGS, FL 34136 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE City-St-ZiP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE

12. 1 hereby 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 empower

STREET ADDRESS CITY-ST-ZIP