## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## Mar 09, 2007 08:00 AM DOCUMENT # P05000000019 **Secretary of State** 1. Entity Name RENDRAG, INC. Principal Place of Business Mailing Address 8211 W BROWAD BLVD PH 2 8211 W BROWAD BLVD PH 2 FORT LAUDERDALE, FL 33324 FORT LAUDERDALE, FL 33324 No Chg-P 01242007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-6410988 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GARDNER, PETER C DO NOT WRITE 8211 W BROWARD BLVD PH2 FORT LAUDERDALE, FL 33324 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 the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) U00000660792 \$5.00 May Be 9. Election Campaign Financino FILE NOW!!! FEE IS \$150.00 03/20/07-80014-013 150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D TITLE GARDNER, FRANK C STREET ADDRESS 7901 SW 6 CT, # 150 PLANTATION, FL 33324 CITY-ST-ZIP TITLE GARDNER, PETER 7901 SW 6 CT, # 150 STREET ADDRESS PLANTATION, FL 33324 CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this fitting 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.

SIGNATURE:

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26-07

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**FILED**