

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2006 8:00 am
Secretary of State

04-13-2006 90273 041 ***150.00

DOCUMENT # P05000009943

1. Entity Name
RH, INC



Principal Place of Business

566 EVEN CT
220
MARCO ISLAND, FL 34145

Mailing Address

566 EDEN CT
220
MARCO ISLAND, FL 34145

2. Principal Place of Business

3280 LINDSEY LN

3. Mailing Address

→ SAME

Suite, Apt. #, etc.

APT. 4

Suite, Apt. #, etc.

City & State

NAPLES, FL

City & State

Zip

34109

Country

Zip

Country

03032006

Chg-P

CR2E034 (11/05)

4. FEI Number

20-2187166

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HUDAK, RICHARD
566 EDEN CT
220
MARCO ISLAND, FL 34145

7. Name and Address of New Registered Agent

Name

RICHARD HUDAK

Street Address (P.O. Box Number is Not Acceptable)

3280 LINDSEY LN, APT. 4

City

NAPLES

FL

Zip Code

34109

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)

REG. AGENT

3/03/06

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	HUDAK, RICHARD	
STREET ADDRESS	566 EDEN CT	
CITY - ST - ZIP	MARCO ISLAND, FL 34145	
TITLE	MGR	<input type="checkbox"/> Delete
NAME	HEVIER, MAREK	
STREET ADDRESS	658 103RD AVE., NORTH	
CITY - ST - ZIP	NAPLES, FL 34108	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	3280 LINDSEY LN., APT. 4	
CITY - ST - ZIP	NAPLES, FL 34109	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. I 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD HUDAK
PRES.

Date

3/03/06

Daytime Phone #

239-465-2586