FILED ANNUAL REPORT Mar 27, 2006 8:00 am Secretary of State **DOCUMENT # P05000046353** 1. Entity Name ROBARB, INC. 03-07-2006 90004 049 ****61.25 03-27-2006 90270 024 ****88.75 Principal Place of Business Malling Address 1005 FOREST COURT 1005 FOREST COURT DUNEDIN, FL 34698 DUNEDIN, FL. 34698 50005703 2. Principal Place of Business 3. Mailing Address Suite, Apt. P, etc. Suite, Apt. #, etc. 01162006 Cho-P CR2E034 (11/05) Applied For City & State City & State 4. FEI Number Not Applicable Zbo Country Ζlp Country \$8.75 Additional 6. Certificate of Status Desired 6. Herne and Address of Current Registered Agent 7. Name and Address of New Registered Agent MOLER, ROBERT B 1005 FOREST COURT Street Address (P.O. Box Number is Not Acceptable) DUNEDIN, FL 34698 City Zip Code The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typical or primed name of registered agent and talo it applicable. OVOTE: Registered Agent stoneture required when reindering DATE \$5.00 May Be 9. Election Campaign Financing ' FILE NOW!!! FEE IS \$150.00." Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10 · OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TTRE C Deleta IIILE Addition MOLER, ROBERT À HALLE NAME STREET ACCRESS 1005 FOREST COURT STREET ADDRESS CITY-ST-ZP **DUNEDIN, FL. 34698** CITY-51-71P TILE ☐ Debba TITLE Addition MANE MAME STREET ADDRESS STREET ADDRESS CITY-51-72P CITY-ST-ZZP TITLE Deteta TITLE ☐ Channe Addition NAME **VILE** STREET ACCRESS STREET ADDRESS (31Y-57-2F CITY-ST-ZIP Delain TITLE TITLE MALE NAME STREET ADDRESS STREET ADORESS CITY-ST-ZP CITY-ST-ZIP TITLE ☐ Delete TILLE ☐ Chance ☐ Addition MARKE MALE STREET ADDRESS STREET ADDRESS CITY-51-759 (211Y-51-2# TITE F TITLE ☐ Charge ☐ Addition

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chiepter 119, Florida Statutes, I further certify that the information indicated on this report of tupplemental report is true and accurate and that hy 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 amaginghent with an address, with all other like empowered.

CITY-SI-ZIP

STREET ADDRESS

SIGNATURE

NAME STREET ADDRESS

CETY - 57 - 22P

2-2-66

127-734-333/



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 8, 2006

ROBARB, INC. 1005 FOREST COURT DUNEDIN, FL 34698

Subject: ROBARB, INC.

Reference Number:

P05000046353

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$88.75.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/rm ··· ANNUAL REPORTS SECTION