


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 08, 2007 8:00 am**  
**Secretary of State**

08-08-2007 90068 046 \*\*\*150.00

<b>DOCUMENT # P06000029905</b>					
<b>1. Entity Name</b> ROB BUERY, INC					
<b>Principal Place of Business</b> 3201 CHICA ST. COCOA, FL 32926 US			<b>Mailing Address</b> 3201 CHICA ST. COCOA, FL 32926 US		
<b>2. Principal Place of Business - No P.O. Box #</b> 4859 Horton St.		<b>3. Mailing Address</b> P.O. Box 237852			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
<b>City &amp; State</b> Cocoa, FL		<b>City &amp; State</b> Cocoa, FL		<b>4. FEI Number</b> 20-4396555	
<b>Zip</b> 32927		<b>Country</b> US		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  BUERY, ROBERT F 3201 CHICA ST. COCOA, FL FL		<b>7. Name and Address of New Registered Agent</b> Name <u>Buery Robert F</u> Street Address (P.O. Box Number is Not Acceptable) <u>4859 Horton St.</u> City <u>Cocoa</u> <u>FL</u> <u>32927</u>			
<b>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.</b> SIGNATURE <u>Robert Buery</u> <u>Robert Buery Pres</u> <u>7-26-07</u> <small>Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUERY, ROBERT F 3201 CHICA ST. COCOA, FL 32926	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Buery, Robert F P.O. Box 237852 Cocoa, FL
<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition					
<input type="checkbox"/> Change <input type="checkbox"/> Addition					
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<b>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.</b>					
SIGNATURE: <u>Robert Buery</u> <u>Robert Buery Pres</u> <u>7-26-07</u> <u>321-720-4150</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					