## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P08000013921

FILED May 01, 2009 Secretary of State

| Entity Nam                                    | ne: RAPTOR  | FABRICATION & EQUIPMEN  | T INC.  |  |  |
|---|---|---|---|--|--|
| Current Principal Place of Business:          |   |   | New Principal Place o   | New Principal Place of Business:             |  |
|   | TICA LANE<br>ON, FL 33414                             | ļ.  |   |  |  |
| Current Mailing Address:                      |   |   | New Mailing Address:  | New Mailing Address:                         |  |
|   | E ROAD 50<br>ND, FL 34736                             |   |   |  |  |
| FEI Number:                                   | 26-1915737  | FEI Number Applied For ( )  | FEI Number Not Applicable ( )                                 | Certificate of Status Desired ( )            |  |
| Name and Address of Current Registered Agent: |   |   | Name and Address of   | Name and Address of New Registered Agent:    |  |
| 11380 PRO                                     |   | NS NETWORK INC.<br>MS ROAD #221E<br>S, FL 33410 US                | GLEASON, THOMAS P<br>7510 STATE ROAD 50<br>GROVELAND, FL 3473 |  |  |
| The above in the State                        |   | ubmits this statement for the p                                   | ourpose of changing its registered                            | office or registered agent, or both,         |  |
| SIGNATURE: THOMAS GLEASON                     |   |   |   | 05/01/2009                                   |  |
|   | Electroni   | c Signature of Registered Age                                     | ent   | Date   |  |
|   |   | (2)(b), F.S., the corporation did no Trust Fund Contribution ( ). | t receive the prior notice.                                   |  |  |
| OFFICERS AND DIRECTORS:                       |   |   | ADDITIONS/CHANGE  | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>GLEASON, THO<br>7510 STATE RO<br>GROVELAND, F | AD 50   | Title: (<br>Name:<br>Address:<br>City-St-Zip:                 | ) Change ()Addition                          |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | D ()<br>DUNDORE, DW.<br>7510 STATE RC<br>GROVELAND, F | AD 50   | Title: (<br>Name:<br>Address:<br>City-St-Zip:                 | ) Change ()Addition                          |  |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS GLEASON Ρ 05/01/2009