


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 08:00 AM
Secretary of State

D DOCUMENT # P93000077034
S 1. Name
 R INVESTMENTS UNLIMITED, INC.



2. Principal Place of Business
 ANDREA LANE
 FT MYERS, FL 33912 US

3. Mailing Address
 2213 ANDREA LANE
 SUITE 109
 FT MYERS, FL 33912 US



01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0450220** Applied For Not Applied For

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

V WILSON, R R
2 ANDREA LANE
#
F FT MYERS, FL 33912

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8 I, 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.

S SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

9. Election Campaign Financing **\$5.00** May Be Added to Fees
 Trust Fund Contribution.

000000398124
 01/30/06-80082-015 150.00

OFFICERS AND DIRECTORS	
<small>1. Name</small>	PSTV WILSON, R R
<small>2. Address</small>	2213 ANDREA LANE, STE 109 FT MYERS, FL
<small>3. Address</small>	
<small>4. Address</small>	
<small>5. Address</small>	
<small>6. Address</small>	
<small>7. Address</small>	
<small>8. Address</small>	
<small>9. Address</small>	

DO NOT WRITE IN THIS SPACE

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: M. Reed Wilson R. REED WILSON 1/9/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR