## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Apr 04, 2005 08:00 AM Secretary of State DOCUMENT # P95000036279 1. Entity Name R.A.R. INSTALLATIONS, INC. Principal Place of Business Mailing Address 20119 HOLLAND AVE 20119 HOLLAND AVE PORT CHARLOTTE, FL 33952 PORT CHARLOTTE, FL 33952 No Chg-P 01042005 CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0575120 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAWLES, PAULA F DO NOT WRITE 20119 HOLLAND AVE PORT CHARLOTTE, FL 33952 IN THIS SPACE 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, typod or printed name of registered agent and title if applicable, (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. D MLE NAME RAWLES, RICHARD STREET ADDRESS 20119 HOLLAND AVE U00000287153 04/04/05-80057-010 15**0.0**0 CITY-ST-ZIP PORT CHARLOTTE, FL 33952 TITLE RAWLES, PAULA F NAME STREET ADDRESS 20119 HOLLAND AVE CITY-ST-7IP PORT CHARLOTTE, FL 33952 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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

SIGNATURE:

FILED