FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000066281

RAIDER ROOTER, INC.

Pri	in	cipal	Pla	ice	of	Bu	siness	
740	Ε	COL	JNT	RY	CL	UB	CIRCLE	
PLA	١N	TATI	ON	FL	33	317	•	

2. Principal Place of Business

Mailing Address

P.O. BOX 15751 PLANTATION FL 33317

2a. Mailing Address

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90031 022 ***158.75



Applied For

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

08/25/1995 4. FEI Number

21	•	26				65-0725368		Not	Applicable		
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	ZĬ	\$8.75 A			
City & Sta	ite	27	City & State			6. Election Campaign Financing		\$5.00	•		
23		28				Trust Fund Contribution		Added to	Fees		
Zip	Country		Zip	Country	,	8. This corporation owes the cur	rent vear Ir	ntangible			
24	25	29		30		Personal Property Tax.			□No		
	9. Name and Address of Currer		tered Agent	1441		10. Name and Address of New	Registered	Agent			
			37.1	81	Name						
	ST, MANFRED 🛴 🔾		•			,					
740 E COUNTRY CLUB CIRCLE					82 Street Address (P.O. Box Number is Not Acceptable)						
· PLA	NTATION FL 33317			83	,	2 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	311 3514 331	130 FO W	7.1.		
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•				84	City	सारमा ४०० विकासि विकास वास्त्र कर	Fi	85 Zip'C	ode		
44.15	to the provisions of Sections 607.050	· · · · · ·	07.4509 Florido Status	too the about	0.0000000000000000000000000000000000000	paration submits this statement for the	DUTDOSA	f changing its	registered		
office or	registered agent or both, in the State	of Florid	la: Such change was a	authorized by	the corporation	on's board of directors. I hereby acce	pt the appo	intment as reg	istered		
agent. I a	am familiar with, and accept the obliga	itions of,	Section 607.0505, Flo	orida Statutes	3.			,			
SIGNATURE	·								<u> </u>		
	Signature, typed or printed name of registered age				nt signature require	ed when reinstating) : 1999	DATE	ND DIDECTO	70 IN 40		
12.	OFFICERS AN	ID DIKE	☐ DELETE	13.		ADDITIONS/CHANGES TO OF	FILERS A	Change	Addition		
TITLE .	P		□ DELETE	1.1 TITLE	1			□ change			
NAME	OBST, MANFRED	_		1.2 NAME							
STREET ADDRESS	1	Æ		1,3 STREE	T ADDRESS						
CITY-ST-ZIP	PLANTATION FL 33317			1.4 CITY-S	T-ZIP						
TITLE	VP		☐ DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition		
NAME	OBST, PIERRETTE			2.2 NAME		•					
STREET ADDRESS	740 E. COUNTRY CLUB CIRCL	.E		2.3 STREE	T ADDRESS	•					
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NAME				3.2 NAME							
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			C) Details	5.1 TITLE 5.2 NAME		, 1			_;		
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NAME				£ 2 emer	TADODECE						
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STREET ADDRESS CITY-ST-ZIP	PART OF STATE OF STAT	ii.	DELETE	5.4 CITY-S 6.1 TITLE 6.2 NAME		graphy took and a second	· .	Change	Addition		

reflect certify that the information supplied with first liming does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.