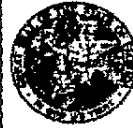


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 17, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P96000063008**

1. Entity Name  
**RML SUPPLY, INC.**



Principal Place of Business  
**4542 W GANDY BLVD  
TAMPA, FL 33611 US**

Mailing Address  
**4542 W GANDY BLVD  
TAMPA, FL 33611 US**



01092006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number **59-3393938** Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

**ALFONSO, SUZETTE M  
305 S. BREVARD AVE, STE 1  
TAMPA, FL 33606**

**DO NOT WRITE  
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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning) DATE

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

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

**1100000387193  
01/19/06-80029-003 150.00**

**10. OFFICERS AND DIRECTORS**

TITLE	P
NAME	ZAVALA, RICHARD
STREET ADDRESS	4542 W GANDY BLVD
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	VP
NAME	ZAVALA, LUIS A.
STREET ADDRESS	4542 W GANDY BLVD
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	T
NAME	ZAVALA, HIDELESA
STREET ADDRESS	4542 W GANDY BLVD
CITY-ST-ZIP	TAMPA, FL 33611
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:**

*Luis A. Zavala* **LUIS A. ZAVALA**

**1/11/06**

**813-902-8032**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #