2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000030178

1. Entity Name

RADR ENTERPRISES, INC.



FILED Jan 12, 2007 08:00 AM Secretary of State

Principal Place of Business

1378 RAILROAD AVE CHIPLEY, FL 32428 Mailing Address

P O BOX 86

CHIPLEY, FL 32428



DO NOT WRITE IN THIS SPACE

01092007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

59-3516591

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Not Applicable

6. Name and Address of Current Registered Agent

GUETTLER, ALFRED D 524-A HIGHWAY 90 CHIPLEY, FL 32428

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 reinstating) DATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		\$5.00 May Be Added to Fees	U00000585166	
10. OFFICERS AND DIRECTORS 01/12/07-80066-025-150(
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GUETTLER, ALFRED D 524-A HIGHWAY 90E CHIPLEY, FL 32428					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GUETTLER, DANIEL L 478 HWY 90 CHIPLEY, FL 32428		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP LANEY, ROGER L III 1649 FALLING WATERS RD. CHIPLEY, FL 32428					
TITLE 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 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 appendiress, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1/11/07 (

(854)638-496