

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 12, 2007 8:00 am**  
**Secretary of State**

04-12-2007 90039 037 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # P99000049755</b><br>1. Entity Name<br><b>READY INDUSTRIAL, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                              |                                                                                     |                                                                                                                                                                                                                                       |  |                                                                              |
| Principal Place of Business<br><b>126 N DIXIE HWY<br/>HOLLYWOOD, FL 33020</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              |                                                                                     | Mailing Address<br><b>126 N DIXIE HWY<br/>HOLLYWOOD, FL 33020</b>                                                                                                                                                                     |                                                                                   |                                                                              |
| 2. Principal Place of Business - No P.O. Box #<br><b>8224 Granada Rd.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              | 3. Mailing Address<br><b>8224 Granada Rd.</b>                                       |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
| Suite, Apt. #, etc.<br>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                              | Suite, Apt. #, etc.<br>                                                             |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
| City & State<br><b>SEBRING, FL.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                              | City & State<br><b>SEBRING, FL.</b>                                                 |                                                                                                                                                                                                                                       | 4. FEI Number<br><b>65-0929078</b>                                                |                                                                              |
| Zip<br><b>33876</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                              | Country<br><b>USA</b>                                                               |                                                                                                                                                                                                                                       | Applied For<br><input type="checkbox"/> Not Applicable                            |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              | <b>\$8.75 Additional Fee Required</b>                                               |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
| 6. Name and Address of Current Registered Agent<br><b>ENGLAND, LEON<br/>126 N DIXIE HWY<br/>HOLLYWOOD, FL 33020</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                              |                                                                                     | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div> |                                                                                   |                                                                              |
| 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.<br><br>SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering)<br>Signature, typed or printed name of registered agent and title if applicable. DATE _____                                                                                                                                                                                                                            |                                                                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
| <b>FILE NOW!!! FEE IS \$150.00<br/>After May 1, 2007 Fee will be \$550.00</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                              | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                                                       | <b>\$5.00 May Be<br/>Added to Fees</b>                                            |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                              |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>                                                                                                                                                                          |                                                                                   |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | D<br><b>ENGLAND, LEON<br/>126 N DIXIE HWY<br/>HOLLYWOOD, FL 33020</b>        | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                        | D<br><b>ENGLAND, LEON<br/>8224 Granada Rd.<br/>SEBRING, FL. 33876-8016</b>        | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | D<br><b>CALTON, JULIAN R<br/>1120 N 76 AVE<br/>PELMBROKE PINES, FL 33024</b> | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Delete                                              |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Delete                                              |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | <input type="checkbox"/> Delete                                              |                                                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                        | <input type="checkbox"/> Change <input type="checkbox"/> Addition                 |                                                                              |
| 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. |                                                                              |                                                                                     |                                                                                                                                                                                                                                       |                                                                                   |                                                                              |
| <b>SIGNATURE:</b> <i>Leon England</i> <b>LEON ENGLAND</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                              |                                                                                     | <b>APRIL 10, 2007</b> <b>863-835-2222</b>                                                                                                                                                                                             |                                                                                   |                                                                              |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                              |                                                                                     | Date Daytime Phone #                                                                                                                                                                                                                  |                                                                                   |                                                                              |