2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

CITY-ST-ZIP

SIGNATURE:

Apr 29, 2005 08:00 AM Secretary of State DOCUMENT # P98000017709 RAAM TRUCK REPAIR & PARTS, INC. Principal Place of Business Mailing Address 367 WILLIAMS POINT BLVD. 367 WILLIAMS POINT BLVD. COCOA, FL 32926 COCOA, FL 32926 02212005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3534466 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARRACK, PATRICK DO NOT WRITE 367 WILLIAMS POINT BLVD. COCOA, FL 32926 ... 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. Lam 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 1\$ \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE HARRACK, PATRICK NAME 367 WILLIAMS POINT BLVD. STREET ADDRESS CITY-ST-ZIP COCOA, FL 32926 TITLE STD U000000342309 NAME HARRACK, JULIET 367 WILLIAMS POINT BLVD. 04/29/05-80051-002 150.00 STREET ADDRESS CITY-ST-ZIP COCOA, FL 32926 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS

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

NING OFFICER OR DIRECTOR

FILED

Daytime Phone