

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002881

FILED  
Jan 25, 2010  
Secretary of State

**Entity Name:** RETRIEVAL-MASTERS CREDITORS BUREAU, INC.

**Current Principal Place of Business:**

2269 S. SAW MILL RIVER ROAD  
BUILDING #3  
ELMSFORD, NY 10523 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 160  
ELMSFORD, NY 10523 US

**New Mailing Address:**

**FEI Number:** 13-2919495

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: DPS  
Name: FUCHS, RUSSELL  
Address: 2269 SAW MILL RIVER ROAD BUILDING #3  
City-St-Zip: ELMSFORD, NY 10523

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: RUSSELL FUCHS

PRES

01/25/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date