

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91180 007 ***150.00

DOCUMENT

1. Entity Name

RCS Corporation

F001000023462

Principal Place of Business

Mailing Address

955 Colony Parkway
 Aiken, SC 29803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

57-0998369

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

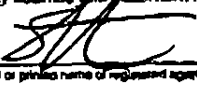
7. Name and Address of New Registered Agent

Cohen, Andrew
 6250 N. Andrews Avenue
 Suite 103A
 Ft. Lauderdale, FL 33309

Name Williams, Steven L.
 Street Address (P.O. Box Number is Not Acceptable)
 452 OSCOLA Street
 #103
 City Altamonte Springs FL Zip Code 32701

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.

SIGNATURE

X 

Steven L. Williams

5/1/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when releasing)

Date

9. This corporation is eligible to satisfy its intangible
 tax filing requirement and elects to do so.
 (See criteria on back) ☐

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME	TITLE	NAME
PC	Garcia, Carlos F.	☐ Delete	
STREET ADDRESS	955 Colony Parkway	☐ Change	☐ Addition
CITY-ST-ZIP	Aiken, SC 29803		
V	Makuch, Norman P.E.	☐ Delete	
STREET ADDRESS	955 Colony Parkway	☐ Change	☐ Addition
CITY-ST-ZIP	Aiken, SC 29803		
ST	Garcia, Karen	☐ Delete	
STREET ADDRESS	955 Colony Parkway	☐ Change	☐ Addition
CITY-ST-ZIP	Aiken, SC 29803		
		☐ Delete	
		☐ Change	☐ Addition
		☐ Delete	
		☐ Change	☐ Addition
		☐ Delete	
		☐ Change	☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE



Carlos F. Garcia President

04/28/2001 (803) 641-0100

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone