

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 06, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # F03000005734**

1. Entity Name  
RC/PB, INC.



Principal Place of Business  
100 SOUTH OCEAN BLVD.  
MANALAPAN, FL 33462

Mailing Address  
2500 VENTURE OAKS WAY, STE. 175  
SACRAMENTO, CA 95833

**DO NOT WRITE IN THIS SPACE**



02222006 No Chg-P CR2E034 (11/05)

4. FEI Number  
71-0955691

Applied For  
Not Applicable

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

**8. Name and Address of Current Registered Agent**

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

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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, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE D  
NAME LEWIS, JULIAN  
STREET ADDRESS CHELSEA HOUSE  
CITY-ST-ZIP WEST GATE LONDON W5 1DR,

TITLE D  
NAME LEWIS, PAUL  
STREET ADDRESS CHELSEA HOUSE  
CITY-ST-ZIP WEST GATE LONDON W5 1DR,

TITLE D  
NAME LEWIS, SIMON  
STREET ADDRESS CHELSEA HOUSE  
CITY-ST-ZIP WEST GATE LONDON W5 1DR,

TITLE D  
NAME LEWIS, MARK  
STREET ADDRESS CHELSEA HOUSE  
CITY-ST-ZIP WEST GATE LONDON W5 1DR,

TITLE P  
NAME HILL, EVA H  
STREET ADDRESS 2500 VENTURE OAKS WAY, STE 175  
CITY-ST-ZIP SACRAMENTO, CA 95833

TITLE S  
NAME ISHERWOOD, MICHAEL L  
STREET ADDRESS 2500 VENTURE OAKS WAY, STE 175  
CITY-ST-ZIP SACRAMENTO, CA 95833

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03/16/06 00003-004 158.75

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IN THIS SPACE**

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.

**SIGNATURE:**

*Eva H. Hill*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/06

Date

Daytime Phone #