

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H85659

Entity Name: RS & RS, INC.

FILED  
Apr 09, 2007  
Secretary of State

## Current Principal Place of Business:

2625 S R 207  
ELKTON, FL 32033

## New Principal Place of Business:

2625 SR 207  
ELKTON, FL 32033

## Current Mailing Address:

2535 STATE RD 16  
ST AUGUSTINE, FL 32092

## New Mailing Address:

2535 SR 16  
ST AUGUSTINE, FL 32092

FEI Number: 59-2613202

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PATEL, RAMU S.  
2535 ST RD 16  
ST AUGUSTINE, FL 32092 US

## Name and Address of New Registered Agent:

PATEL, SNEHAL R  
2535 SR 16  
ST AUGUSTINE, FL 32092 US

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: SNEHAL R. PATEL

04/09/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: PATEL, RAMU S.,  
Address: 2535 ST RD 16  
City-St-Zip: ST AUGUSTINE, FL

Title: SD ( ) Delete  
Name: PATEL, RAMILA R.,  
Address: 2535 ST RD 16  
City-St-Zip: ST AUGUSTINE, FL

Title: VP ( ) Delete  
Name: PATEL, SWATI  
Address: 2535 ST RD 16  
City-St-Zip: ST AUGUSTINE, FL

Title: VP (X) Delete  
Name: PATEL, SNEHAL  
Address: 2535 ST RD 16  
City-St-Zip: ST AUGUSTINE, FL

Title: VP (X) Delete  
Name: PATEL, AMI  
Address: 2535 SR 16  
City-St-Zip: ST AUGUSTINE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PATEL, SWATI R  
Address: 2535 SR 16  
City-St-Zip: ST AUGUSTINE, FL

Title: VP (X) Change ( ) Addition  
Name: PATEL, AMI R  
Address: 2535 SR 16  
City-St-Zip: ST AUGUSTINE, FL

Title: VPTS (X) Change ( ) Addition  
Name: PATEL, SNEHAL R  
Address: 2535 SR 16  
City-St-Zip: ST AUGUSTINE, FL

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: SNEHAL R. PATEL

VP

04/09/2007

Electronic Signature of Signing Officer or Director

Date