## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # L74982** 

1. Entity Name RC ALUMINUM INDUSTRIES, INC.



**FILED** Aug 02, 2006 08:00 Al Secretary of State

Principal Place of Business

2805 N.W. 75TH AVENUE MIAMI, FL 33122

Mailing Address

2805 N.W. 75TH AVENUE MIAMI, FL 33122



## DO NOT WRITE IN THIS SPACE

CR2E034 (11/05) 07102006 No Chg-P

| 4. FEI Number                    | Applied For       |
|----------------------------------|-------------------|
| 65-0197693                       | Not Applicable    |
| 5. Certificate of Status Desired | \$8.75 Additional |

6. Name and Address of Current Registered Agent

FRANKEL, ESQ., ROBERT P 25 WEST FLAGLER STREET SUITE 900 MIAMI, FL 33130

CITY-ST-ZIP

changed, or on an attachn

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

|  | named entity submits this statement for the<br>lons of registered agent | purpose of changing i  | its registered off    | ice or re   | egistered agent, or bo     | th, in the State of Florida   am familiar with, and accept   U00000573106   U00000573106   U0000000000000000000000000000000000 |  |  |
|--|---|------------------------|-----------------------|---|----------------------------|--|--|--|
| O'GRATOTIC=  | Signature, typed or printed name of registered agent and ti             | tie il applicable. (NC | OTE: Registered Agent | signature   | required when reinstating) | DATE   |  |  |
| FILE NOWIII FEE IS \$150.00  Due by September 6, 2006  9. Election Campaign Finance Trust Fund Contribution. |   |                        |                       | sing \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |                            |  |  |  |
| 10.  | OFFICERS AND DIR  | ECTORS                 |                       |   |                            |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | PD<br>CASARES, RAUL<br>2805 NW 75TH AVE<br>MIAMI, FL 33122              |                        | ,                     | DO NOT WRITE  |                            |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VSD<br>VIAS, NANCY M<br>2805 NW 75TH AVE<br>MIAMI, FL 33122             |                        |                       |   |                            |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VD<br>MESTRES, ANGEL<br>2805 NW 75 AVE<br>MIAMI, FL 33122               |                        |                       |   |                            |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  | VD<br>PAREDES, EUSEBIO<br>2805 NW 75 AVE.<br>MIAMI, FL 33122            |                        |                       | IN THIS SPACE   |                            |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP  |   |                        |                       |   |                            |  |  |  |
| TITLE NAME STREET ADDRESS  |   |                        |                       |   |                            |  |  |  |

12. I hereby certify that the information supplied with this flying 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 vustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if

all other like empowered.

SIGNATURE AND TYPED OB PRINTED NAME OF SIGNING OFFICER OR DIRECTOR