2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State

DOCU 1. Entity Nam RSI SOF				05-01-2006	90427 007 ***1 <i>5</i>	0.00		
Principal Plac	e of Business	Mailing Address			1			
Principal Place of Business 1204 CHIKASAW ST JUPITER, FL 33458		102 WINDSOR RD. EAST JUPITER, FL 33469			å 18611891 111 e	.	500181	70
2. Principal P	lace of Business	3. Mailing Address 1204 CHICKASAW ST.						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03272006	Chg-P	CR2E034 (11/05)	
City & State		City & State JUDITER FL			4. FEI Number NOT APF	PLICABLE	⊢	oplied For
Zip	Country	Zip 33458	Country			Status Desired	\$8.75 Add	fitional
	6. Name and Address of Current R		-		7. Name and A	ddress of New R		
QUICK, KI 102 WIND JUPITER,	Name Street A	Sin Address (I	1 Qu	is Not Acceptable				
ŕ			City	TUR	DITER	,	FL 728	² /58/
8. The above named entity submits this statement for the purpose of changing its registered office the obligations of registered agent. SIGNATURE Signature, hyped or printer name of registered agent and title if applicable. WOTE Registered Agent agent.					EE (DE		rida. I am familiar with, 4/26/06	and accept
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	9. Election Campaign Trust Fund Contrib		\$5. Add	.00 May Be ed to Fees			
10.	, OFFICERS AND D	DIRECTORS	11.		ADDITIONS/C	HANGES TO OFFI	CERS AND DIRECTOR	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P QUICK, KIM 102 WINDSOR RD. EAST JUPITER, FL 33469	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PR1 120	ESIPEUT M QUI Y CHIC VDITEI	CK KASAW R FL	CERS AND DIRECTOR Change S 33458 Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	THLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition

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:	Mini Much SIGNATURE AND TYPED OR PRINTED NAME OF	Kin QuiCK SIGNING OFFICER OR DIRECTOR	4/26/06	56/-575-97 Daytime Phone #	188