


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2007 8:00 am
Secretary of State

05-02-2007 90068 037 ***150.00

DOCUMENT # P00000070648 1. Entity Name RHE MANAGEMENT SERVICES, INC.	
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Principal Place of Business 11904 MIRAMAR PKWY MIRAMAR, FL 33025	Mailing Address 11904 MIRAMAR PKWY MIRAMAR, FL 33025
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04302007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1026242	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent RIOS, ELSA C 11904 MIRAMAR PKWY MIRAMAR, FL 33025
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**DO NOT WRITE
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, 2007 Fee will be \$350.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PADRON, HUMBERTO 629 SILVER BIRCH PL LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PADRON, ENRIQUE 629 SILVER BIRCH PL LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PADRON, RICARDO 629 SILVER BIRCH PL LONGWOOD, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIACQUADIO, SALVADOR 713 CREEKWATER TERRACE #107 LAKE MARY, FL 32750
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TOLEDO, JORGE 11532 SW 152ND PLACE MIAMI, FL 33196
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
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: Elsa Rios **REG. AGENT** 4/30/07 (954)442-8771
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #