## **2008 FOR PROFIT CORPORATION**

## **ANNUAL REPORT FILED** Apr 10, 2008 08:00 Al Secretary of State **DOCUMENT # P00000078009** 1. Entity Name R & M STEEL, INC. Principal Place of Business Mailing Address 6811 SW 49TH STREET 6811 SW 49TH STREET MIAMI, FL 33155 MIAMI, FL 33155 CR2E034 (11/05) 03132008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1043602 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE ARROYO, RAUL A **6811 SW 49TH STREET** MIAMI, FL 33155 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE ARROYO, MONICA H NAME STREET ADDRESS 6811 SW 49TH CITY-ST-ZIP MIAMI, FL 33155 TITLE NAME ARROYO, RAUL A STREET ADDRESS 6811 SW 49TH CITY-ST-ZIP MIAMI, FL 33155 TITLE NAME STREET ADDRESS DO NOT WRIT CITY-ST-ZIP IN THIS SPAC NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MOYICA ARROYO

03-30-08

786)295-6412

Daytime Phone #

Date