


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 29, 2005 08:00 AM
Secretary of State

| | |
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| DOCUMENT # P00000087195 1. Entity Name RAFAEL BUILDERS, INC. |  |
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| Principal Place of Business 1701 SUNRISE DRIVE SEBRING, FL 33872 | Mailing Address 551 SOUTH COMMERCE AVE SEBRING, FL 33870 |
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DO NOT WRITE IN THIS SPACE



02082005 No Chg-P CR2E034 (10/03)

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| 4. FEI Number 65-1038368 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |

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| 6. Name and Address of Current Registered Agent ABLES, III, CLIFFORD M 551 SOUTH COMMERCE AVENUE SEBRING, FL 33870 | DO NOT WRITE IN THIS SPACE |
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

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| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 | 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 | P RIVERO, RAFAEL 1701 SUNRISE DR SEBRING, FL 33872 |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VP RIVERO, GLADYS 1701 SUNRISE DR SEBRING, FL 33872 |
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U000000343072
04/29/05-80079-025 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **RAFAEL RIVERO** **3-25-05 863-381-7974**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #