2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 27, 2008 08:00 A **Secretary of State DOCUMENT # P00000090804** 1. Entity Name RUPÁLI CORP. Mailing Address Principal Place of Business 3639 SE SALERNO RD 3639 SE SALERNO RD PORT SALERNO, FL 34992 PORT SALERNO, FL 34992 No Chg-P CR2E034 (11/05) 03202008 DO NOT WRITE IN THIS SPACE Applied For 4. FÉI Number 65-1042597 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARPALE, RAJENDRAKUMAR DO NOT WRITE 2080 NW MARSHRABBIT LANE JENSEN BEACH, FL 34957 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE HARPALE, RAJENDRAKUMAR NAME STREET ADDRESS 2080 NW MARSHRABBIT LANE CITY-ST-ZIP JENSEN BEACH, FL 34957 TITLE HARPALE, HEMADEN STREET ADDRESS 2080 NW MARSHRABBIT LANE CITY-ST-7IP JENSEN BEACH, FL 34957 TITLE STREET ADORESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP

12. Thereby cartify that the information supplied with this filling 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

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

FILED