

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000002464

FILED  
Apr 30, 2004  
Secretary of State

Entity Name: RCD SYSTEMS, INC.

**Current Principal Place of Business:**

5448 CLUB CIRCLE  
W PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

5448 CLUB CIRCLE  
W PALM BEACH, FL 33415

**New Mailing Address:**

FEI Number: 52-2287001      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CALVETE DAUDT, RAFAEL  
5448 CLUB CIRCLE  
W PALM BEACH, FL 33415      US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C C  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C M  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C S  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C P  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C D  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

Title: P      ( ) Delete  
Name: DAUDT, RAFAEL C T  
Address: 5448 CLUB CIRCLE  
City-St-Zip: WEST PALM BEACH, FL 33415 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL DAUDT

P

04/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date