

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000091303

FILED  
May 08, 2008  
Secretary of State

Entity Name: R & C NEW CONCEPT HOSPITALITY INC.

## Current Principal Place of Business:

17864 SW 2ND ST  
PEMBROKE PINES, FL 33029

## New Principal Place of Business:

## Current Mailing Address:

17864 SW 2ND ST  
PEMBROKE PINES, FL 33029

## New Mailing Address:

FEI Number: 65-1145987

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FERRER, ROBERTO  
19911 NW 79TH AVE  
MIAMI, FL 33015 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: FERRER, CELIA  
Address: 19911 NW 79TH AVE  
City-St-Zip: MIAMI, FL 33015

Title: V ( ) Delete  
Name: FERRER, ROBERTO  
Address: 19911 NW 79TH AVE  
City-St-Zip: MIAMI, FL 33015

Title: D ( ) Delete  
Name: SANTOS, JOSE J  
Address: 19831 NW 79TH AVE.  
City-St-Zip: MIAMI GARDENS, FL 33015

Title: D ( ) Delete  
Name: SANTOS, MARIA J  
Address: 19831 NW 79TH AVE.  
City-St-Zip: MIAMI GARDENS, FL 33015

Title: D ( ) Delete  
Name: RODRIGUEZ, JOSE I  
Address: 19911 NW 79TH AVE.  
City-St-Zip: MIAMI GARDENS, FL 33015

## 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:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: FERRER CELIA

P

05/08/2008

Electronic Signature of Signing Officer or Director

Date