


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2004 08:00 AM
Secretary of State

DOCUMENT # P01000108300 1. Entity Name R. P. TECHNOLOGIES, INC.	
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Principal Place of Business 4973 S.W. 74TH COURT MIAMI, FL 33155-4471	Mailing Address 4973 S.W. 74TH COURT MIAMI, FL 33155-4471
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DO NOT WRITE IN THIS SPACE



04192004 No Chg-P CR2E034 (10/03)

4. FEI Number 73-1627367	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GRUENINGER AND PUJOL, P.A.
 3191 CORAL WAY #1005
 MIAMI, FL 33155

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B. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

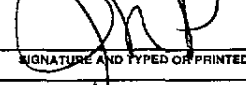
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

U00000125785
 04/23/04-80007-010 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PUJOL, ROSE B 1755 FAIRHAVEN PLACE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LOPEZ, MARIA M 1755 FAIRHAVEN PLACE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BEJAR, LILIANA THE COLONNADE OFFICE, TOWER PH1120 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S PALACIOS, RAFAEL R 1755 FAIRHAVEN PLACE MIAMI, FL 33133
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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:  DATE: **4/21/04** DAYTIME PHONE #: **305-444-3242**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #