2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000108300

Entity Name: R. P. TECHNOLOGIES, INC.

1755 FAIRHAVEN PLACE

MIAMI, FL 33133

Address:

City-St-Zip:

FILED Oct 07, 2005 Secretary of State

Littly Na	IIIC. K.F.IC	SI INOLOGILO, INC.					
Current P	rincipal Place	e of Business:	New Princ	New Principal Place of Business:			
	74TH COURT 331554471	ī					
Current M	lailing Addres	ss:	New Maili	New Mailing Address:			
	74TH COURT 331554471	ī					
FEI Number	: 73-1627367	FEI Number Applied For()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and	l Address of (Current Registered Agent:	Name and	Address of	New Registered Agent:		
	GER AND PU AL WAY #100 33155 US						
	named entity e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or	both,	
SIGNATUI	RE: JOSE PL	JJOL					
	Electron	nic Signature of Registered Ag	jent		Date		
Election Car	mpaign Financin	g Trust Fund Contribution ().					
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	PD (PUJOL, ROSE 1755 FAIRHAV MIAMI, FL 331	EN PLACE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	V (LOPEZ, MARIA 1755 FAIRHAV MIAMI, FL 331	EN PLACE	Title: Name: Address: City-St-Zip:	V (X LOPEZ, MARI. 4973 SW 74 C MIAMI, FL 33	COURT		
Title: Name: Address: City-St-Zip:	BEJAR, LILIAN	DE OFFICE, TOWER PH1120	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	S (PALACIOS, RA) Delete FAEL R	Title: Name:	() Change () Addition		

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.

Address:

City-St-Zip:

SIGNATURE: MARIA M LOPEZ V 10/07/2005