

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000027413

Entity Name: R.C. MARKETING, INC.

FILED
May 01, 2008
Secretary of State

Current Principal Place of Business:

5931 PLUNKETT
HOLLYWOOD, FL 33023

New Principal Place of Business:

1240 NW 155TH LANE
305
MIAMI, FL 33169

Current Mailing Address:

1240 NW 155TH LANE
305
MIAMI, FL 33169

New Mailing Address:

FEI Number: 01-0712562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JONES, SHAWN
1240 NW 155TH LANE
305
MIAMI, FL 33169 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: PDS () Delete
Name: JONES, SHAWN
Address: 1240 NW 155TH LANE #305
City-St-Zip: MIAMI, FL 33169

Title: VPS () Delete
Name: JONES, PERNELL
Address: 1240 NW 155TH LANE #305
City-St-Zip: MIAMI, FL 33169 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: SHAWN JONES

PDS

05/01/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date