

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000028579

Entity Name: R.S.& C TRUCKING INC

FILED
Apr 10, 2008
Secretary of State

Current Principal Place of Business:

3957 SHADOWWIND WAY
GOTHA, FL 34734

New Principal Place of Business:

Current Mailing Address:

3957 SHADOWWIND WAY
GOTHA, FL 34734

New Mailing Address:

FEI Number: 04-3620863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NANKUMAR, BASSIT
3957 SHADOWWIND WAY
GOTHA, FL 34734 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: BASSIT, NANKUMAR
Address: 3957 SHADOW WIND WAY
City-St-Zip: GOTHA, FL 34734

Title: D (X) Delete
Name: RODRIGUEZ, LOUIS F
Address: 324 ASHBURTON WAY
City-St-Zip: KISSIMMEE, FL 34768

Title: D (X) Delete
Name: MARTINEZ, EDUARDO
Address: 168 LAPAZ DR
City-St-Zip: KISSIMMEE, FL 34743

Title: D (X) Delete
Name: BASSIT, RYAN
Address: 3957 SHADOWWIND WAY
City-St-Zip: GOTHA, FL 34734

Title: D (X) Delete
Name: SOOKNANAN, RAJOOP
Address: 5932 CARTER ST
City-St-Zip: ORLANDO, FL 32835

Title: D (X) Delete
Name: DE LA FUENTE, LUIS
Address: 1119 PLATO AVE
City-St-Zip: ORLANDO, FL 32809

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: NANKUMAR, BASSIT
Address: 3957 SHADOW WIND WAY
City-St-Zip: GOTHA, FL 34734

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

Title: () Change () Addition
Name:
Address:
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Name:
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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: BASSIT NANKUMAR

P

04/10/2008

Electronic Signature of Signing Officer or Director

Date