

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000049527

Entity Name: RCN INVESTMENTS, INC.

FILED
Jul 14, 2008
Secretary of State

Current Principal Place of Business:

29 NORTH FEDERAL HIGHWAY
HALLANDALE, FL 33009

New Principal Place of Business:

Current Mailing Address:

29 NORTH FEDERAL HIGHWAY
HALLANDALE, FL 33009

New Mailing Address:

FEI Number: 58-2373617

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COHEN, SIMON
29 N FEDERAL HWY
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

SILVA'S ENTERPRISE, INC.
5220 S UNIVERSITY DR
SUITE C-102
DAVIE, FL 33328 US

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: FERNANDO SILVA

07/14/2008

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: D () Delete
Name: NIRENBERG, JASON A
Address: 29 NORTH FEDERAL HIGHWAY
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: ROSENBLATT, MARC S
Address: 29 N FEDERAL HWY
City-St-Zip: HALLANDALE, FL 33009

Title: D () Delete
Name: COHEN, SIMON
Address: 29 N FEDERAL HWY
City-St-Zip: HALLANDALE, FL 33009

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:

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: SIMON COHEN

D

07/14/2008

Electronic Signature of Signing Officer or Director

Date