

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000050690

Entity Name: RARE DELIGHTS, INC.

FILED
Apr 21, 2008
Secretary of State

Current Principal Place of Business:

1740 NW N RIVER DRIVE
315
MIAMI, FL 33125

New Principal Place of Business:

1525 SW MERCHANT LANE
PORT SAINT LUCIE, FL 34953

Current Mailing Address:

1740 NW N RIVER DRIVE
315
MIAMI, FL 33125

New Mailing Address:

1525 SW MERCHANT LANE
PORT SAINT LUCIE, FL 34953

FEI Number: 56-2361791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBREGON, CARLOS L
8100 SW 19TH ST.
MIAMI, FL 33155 US

Name and Address of New Registered Agent:

FLYNN, IRIS J
12850 W STATE ROAD 84
#20-5
DAVIE, FL 33325 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: IRIS J FLYNN

04/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: REYES, ADOLFO
Address: 1740 NW NORTH RIVER DRIVE SUITE 315
City-St-Zip: MIAMI, FL 33125

Title: P () Delete
Name: REYES, LUZ
Address: 1740 NW NORTH RIVER DRIVE SUITE # 315
City-St-Zip: MIAMI, FL 33125

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: V (X) Change () Addition
Name: REYES, ADOLFO
Address: 1525 SW MERCHANT LANE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

Title: P (X) Change () Addition
Name: REYES, LUZ
Address: 1525 SW MERCHANT LANE
City-St-Zip: PORT SAINT LUCIE, FL 34953 US

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: ADOLFO REYES

V

04/21/2008

Electronic Signature of Signing Officer or Director

Date