2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE

FILED DOCUMENT # P03000074168 Mar 12, 2007 08:00 AM 1. Entity Namo **Secretary of State** RAFCO, INC. Principal Place of Business Mailing Address 835 23 AVE VERO BCH FL 32960 835 23 AVE VERO BCH FL 32960 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 16-1675014 Not Applicable 7in Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Namo FIORE, RICHARD A JR. Street Address (P.O. Box Number is Not Acceptable) 835 23 AVE VERO BCH FL 32960 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered effice or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and title it applicable, (NOTE: Registered Agent signature required when reinstaling) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DPST THE Delete TITLE ☐ Change ☐ Addition U00000663060 FIORE, RICHARD A JR. NAME 03/21/07-80037-012 150.00 835 23 AVE STREET ADDRESS STREET ADDRESS VERO BCH FL 32960 CITY-ST-ZIP CITY-ST-ZIP Delete TOTE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-7IP Tilet. Delete Dill AddItion NAME. NAMI STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ME Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete 11111 Change Addition NAMI' NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY ST-ZIP THE HILL Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutos. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 Statutos; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

Richard Afrone Jr 3-9-07 772 770 6455