

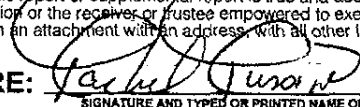


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 24, 2006 08:00 AM
Secretary of State**

DOCUMENT # P03000117439		
1. Entity Name R.C. CONSTRUCTION OF SOUTH FLORIDA, INC.		
Principal Place of Business 11919 59TH STREET NORTH ROYAL PALM BEACH, FL 33411		Mailing Address 11919 59TH STREET NORTH ROYAL PALM BEACH, FL 33411
		
04112006 No Chg-P CR2E034 (11/05)		
4. FEI Number 20-0333190		Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent GASS, DANIEL G 10001 NW 50TH STREET STE 204 SUNRISE, FL 33351		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPTS RUSSIANOFF, RACHEL 11919 59TH STREET NORTH ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHAVIS, RUDY 11919 59TH STREET NORTH ROYAL PALM BEACH, FL 33411	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  Rachel RUSSIANOFF		4/11/2006 (561) 615-1635
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #