

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048937

FILED
Apr 29, 2005
Secretary of State

Entity Name: RPM III INVESTMENTS, INCORPORATED

Current Principal Place of Business:

PO BOX 823696
S FLORIDA, FL 33082

New Principal Place of Business:

7740 NOVA DRIVE
UNIT B1
DAVIE, FL 33324

Current Mailing Address:

PO BOX 823696
S FLORIDA, FL 33082

New Mailing Address:

7740 NOVA DRIVE
UNIT B1
DAVIE, FL 33324

FEI Number: 20-0930678

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

IZQUIERDO, LISSETTE
3202 SW 175TH AVE
MIRAMAR, FL 33029 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: DS () Delete
Name: IZQUIERDO, LISSETTE
Address: 3202 SW 175TH AVE
City-St-Zip: MIRAMAR, FL 33029

Title: P () Delete
Name: PALOMINO, RAFAEL
Address: PO BOX 823696
City-St-Zip: S FLORIDA, FL 33082

Title: V () Delete
Name: RODRIGUEZ, MIGUEL
Address: PO BOX 823696
City-St-Zip: S FLORIDA, FL 33082

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change () Addition
Name: PALOMINO, RAFAEL
Address: 8230 NW 191 STREET, #G
City-St-Zip: MIAMI, FL 33015

Title: V (X) Change () Addition
Name: RODRIGUEZ, MIGUEL
Address: 19506 NW 79 PLACE
City-St-Zip: MIAMI, FL 33015

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LISSETTE IZQUIERDO

DS

04/29/2005

Electronic Signature of Signing Officer or Director

_____ Date