2008 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 28, 2008 08:00 AM Secretary of State DOCUMENT # P04000114535 R & A MECHANICAL CORP. Principal Place of Business Mailing Address 7215 NW 41ST STREET **7215 NW 41ST STREET** BAY J MIAMI, FL 33166 MIAMI, FL 33166 CR2E034 (11/05) 04222008 No Chg-P DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-1468925 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PERALTA, RICARDO DO NOT WRITE **7215 NW 41ST STREET BAY J** IN THIS SPACE MIAMI, FL 33166 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. Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE PERALTA, ALINA NAME 7215 NW 41ST STREET #J STREET ADDRESS MIAMI, FL 33166 CITY-ST-ZIP PERALTA, RICARDO NAME **7215 NW 41ST STREET #J** STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33166 TITLE SAN ROMAN, OTTO 7215 NW 41ST STREET #J STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33166 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. Thereby 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 of 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 of 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 altrachment with a address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS

SUGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4/22/08 786-439-3576

FILED