

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129493

Entity Name: RBA EXCAVATION INC.

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

16225 SW 117 AVENUE
UNIT D14
MIAMI, FL 33177

New Principal Place of Business:

Current Mailing Address:

16225 SW 117 AVENUE
UNIT D14
MIAMI, FL 33177

New Mailing Address:

FEI Number: 20-1619487 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, ROBERTO
16225 SW 117 AVENUE
UNIT D14
MIAMI, FL 33177 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: P () Delete
Name: LEON, ROBERTO
Address: 16225 SW 117 AVENUE, UNIT D14
City-St-Zip: MIAMI, FL 33177

Title: V () Delete
Name: LEON, MARJORIE
Address: 16225 SW 117 AVENUE, UNIT D14
City-St-Zip: MIAMI, FL 33177

Title: S () Delete
Name: LOPEZ, WILLIAM AHMED
Address: 16225 SW 117 AVENUE, UNIT D14
City-St-Zip: MIAMI, FL 33177

Title: T () Delete
Name: GARCIA, JORGE LUIS
Address: 16225 SW 117 AVENUE, UNIT D14
City-St-Zip: MIAMI, FL 33177

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERTO LEON

P

01/10/2007

Electronic Signature of Signing Officer or Director

_____ Date