2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000135249

AUGUSTE, EVRANCE

4615 SW 25TH STREET

HOLLYWOOD, FL 33023

Name:

Address:

City-St-Zip:

FILED Feb 28, 2006 Secretary of State

| Entity Nar | ne: THE R-TIF | FACTS CLOSET, INC. | | | | | |
|---|--|----------------------------------|---|--|------------------------|-----------------|--|
| Current Principal Place of Business: | | | New Princ | New Principal Place of Business: | | | |
| | 5 TH STREET OD, FL 33023 | | | | | | |
| Current Mailing Address: | | | New Mailing Address: | | | | |
| | 5 TH STREET OD, FL 33023 | | | | | | |
| FEI Number: | 20-1670237 | FEI Number Applied For () | FEI Number Not Appli | cable () | Certificate of Status | Desired () | |
| Name and | Address of Co | urrent Registered Agent: | Name and | Name and Address of New Registered Agent: | | | |
| | EZ, PAUL 5TH STREET OD, FL 33023 | US | | | | | |
| The above in the State | | ubmits this statement for the pu | rpose of changing it | s registered o | office or registered a | agent, or both, | |
| SIGNATUR | RE: | | | | | | |
| | Electroni | c Signature of Registered Agen | t | | Date | | |
| Election Can | npaign Financing | Trust Fund Contribution (). | | | | | |
| OFFICERS | AND DIRECT | ORS: | ADDITION | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | | |
| Title: Name: Address: City-St-Zip: | D () I RODRIGUEZ, PA 4615 SW 25TH S HOLLYWOOD, F | STREET | Title: Name: Address: City-St-Zip: | (|) Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () PRODRIGUEZ, PA 4615 SW 25TH S HOLLYWOOD, F | STREET | Title: Name: Address: City-St-Zip: | (|) Change () Addition | | |
| Title: Name: Address: City-St-Zip: | D () I AUGUSTE, EVRA 4615 SW 25TH S HOLLYWOOD, F | STREET | Title: Name: Address: City-St-Zip: | D (X RODRIGUEZ, I 4615 SW 25TH HOLLYWOOD, | H STREET | | |
| Title: | D () | Nelete | Title. | D (X | Change () Addition | | |

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.

Name:

Address:

City-St-Zip:

PAUL, PAUL

4615 SW 25TH STREET

HOLLYWOOD, FL 33023

SIGNATURE: PAUL RODRIGUEZ D 02/28/2006