

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000033327

FILED  
Jul 09, 2008  
Secretary of State

Entity Name: RAFO CORPORATION

## Current Principal Place of Business:

3620 COLONIAL BLVD.  
SUITE 240  
FORT MYERS, FL 33966

## New Principal Place of Business:

3620 COLONIAL BLVD.  
SUITE 160  
FORT MYERS, FL 33966

## Current Mailing Address:

3620 COLONIAL BLVD.  
SUITE 240  
FORT MYERS, FL 33966

## New Mailing Address:

3620 COLONIAL BLVD.  
SUITE 160  
FORT MYERS, FL 33966

FEI Number: 20-2406171

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

ROBLES, RAFAEL V  
3620 COLONIAL BLVD.  
SUITE 240  
FORT MYERS, FL 33966 US

## Name and Address of New Registered Agent:

ROBLES, RAFAEL V  
3620 COLONIAL BLVD.  
SUITE 160  
FORT MYERS, FL 33966 US

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: RAFAEL ROBLES

07/09/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROBLES, RAFAEL V SR  
Address: 3620 COLONIAL BLVD. SUITE 240  
City-St-Zip: FORT MYERS, FL 33966 LE

Title: VP ( ) Delete  
Name: GARCIA, VIOLETA N MS  
Address: 3620 COLONIAL BLVD. SUITE 240  
City-St-Zip: FORT MYERS, FL 33966 LE

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ROBLES, RAFAEL V SR  
Address: 3620 COLONIAL BLVD. SUITE 160  
City-St-Zip: FORT MYERS, FL 33966 LE

Title: VP (X) Change ( ) Addition  
Name: GARCIA, VIOLETA N MS  
Address: 3620 COLONIAL BLVD. SUITE 160  
City-St-Zip: FORT MYERS, FL 33966 LE

I hereby certify that the information supplied with this filing does not qualify 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: RAFAEL ROBLES

P

07/09/2008

Electronic Signature of Signing Officer or Director

Date