


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90093 024 ***158.75

DOCUMENT # P05000044773		
1. Entity Name RSB CONTRACTING, INC.		

Principal Place of Business 703 S. LAKESHORE BLVD. HOWEY IN THE HILLS, FL 34737	Mailing Address 703 S. LAKESHORE BLVD. HOWEY IN THE HILLS, FL 34737
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60011253

2. Principal Place of Business - No P.O. Box # 804 CONNECTICUT AVE.	3. Mailing Address SAM R
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State SAINT CLOUD FL.	City & State
Zip 34769	Country OSCEOLA

01062007 Chg-P CR2E034 (12/06)

4. FEI Number 34-2041888	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent FORBES, RENEE D 703 S. LAKESHORE BLVD. HOWEY IN THE HILLS, FL 34737	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 Renee D. Forbes	DATE 01-25-07

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS FORBES, RENEE D 703 S. LAKESHORE BLVD. HOWEY IN THE HILLS, FL 34737 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPTS FORBES, RENEE D. 804 CONNECTICUT AVE. SAINT CLOUD FL. 34769 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby 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 or 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 or 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 attachment with an address with all other like empowered.	
SIGNATURE: Renee D. Forbes	DATE 01-25-07 Daytime Phone # 954-444-6244