

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000058631

FILED  
Sep 17, 2008  
Secretary of State

Entity Name: R & P BUSINESS INCORPORATED

## Current Principal Place of Business:

7901 KINGSPONTE PKWY  
STE 12E  
ORLANDO, FL 32819 US

## New Principal Place of Business:

## Current Mailing Address:

7901 KINGSPONTE PWKY  
STE 12E  
ORLANDO, FL 32819 US

## New Mailing Address:

FEI Number: 76-0790594      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LARSON, CAROLINE  
8818 COMMODITY CIR  
40  
ORLANDO, FL 32819 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

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: DP ( ) Delete  
Name: SANTOS, JUVANETE M  
Address: ROD BR101 NORTE KM 54.6  
City-St-Zip: PAULISTA, PE 53413 BR

Title: DT ( ) Delete  
Name: AMARAL, JOSE R  
Address: 3449 SHALLOT DR APT 104  
City-St-Zip: ORLANDO, FL 32835 US

Title: DS ( ) Delete  
Name: CAVALCANTE, PATRICIA B  
Address: 3449 SHALLOT DR APT 104  
City-St-Zip: ORLANDO, FL 32835 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: DT (X) Change ( ) Addition  
Name: AMARAL, JOSE R  
Address: 1089 S HIAWASSEE RD APT 313  
City-St-Zip: ORLANDO, FL 32835 US

Title: DS (X) Change ( ) Addition  
Name: CAVALCANTE, PATRICIA B  
Address: 1089 S HIAWASSEE RD APT 313  
City-St-Zip: ORLANDO, FL 32835 US

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: JUVANETE M SANTOS

DP

09/17/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date