

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2008 8:00 am
Secretary of State

05-14-2008 90015 016 ***150.00

DOCUMENT # P05000112944 1. Entity Name RH PROFESSIONAL INSTALLATION, INC.					
Principal Place of Business 7375 SW 38 ST. MIAMI, FL 33155			Mailing Address 7375 SW 38 ST. MIAMI, FL 33155		
2. Principal Place of Business - No P.O. Box # 1605 SW 131 AVE		3. Mailing Address 1605 SW 131 AVE			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State MIAMI FL		City & State MIAMI FL		4. FEI Number 20-3329640	
Zip 33175		Country DADE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RODRIGUEZ, AMERICA 187 NW 57TH AVE., STE. 17 MIAMI, FL 33126			7. Name and Address of New Registered Agent Name RSV TAX & ACCOUNTING SERVICES, INC. Street Address (P.O. Box Number is Not Acceptable) 385 W 49th STREET City HALEAH FL Zip Code 33012		
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  4-24-08 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00.		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERNANDEZ, RAFAEL 7375 SW 38 ST. MIAMI, FL 33155		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HERNANDEZ, RAFAEL 1605 SW 131 AVE MIAMI, FL 33175	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" 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: 			4-24-08 786 357 0416		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		

40102035



04222008 Chg-P CR2E034 (12/06)

4. FEI Number
20-3329640
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent
Name
RSV TAX & ACCOUNTING SERVICES, INC.
Street Address (P.O. Box Number is Not Acceptable)
385 W 49th STREET
City HIALEAH FL Zip Code 33012

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Signature, typed or printed name of registered agent and title if applicable.

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10. OFFICERS AND DIRECTORS

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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #