2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000062094

Entity Name: R & P UNLIMITED SERVICES, INC

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7601 E TREASURE DR SUITE 1924 16485 COLLINS AVE NORTH BAY VILLAGE, FL 33141 STE 2536

N MIAMI BEACH, FL 33160

Current Mailing Address: New Mailing Address:

7601 E TREASURE DR SUITE 1924 16485 COLLINS AVE NORTH BAY VILLAGE, FL 33141

STE 2536

N MIAMI BEACH, FL 33160

FEI Number: 20-4848223 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BENITEZ, PEDRO BENITEZ, PEDRO 16485 CÓLLINS AVE 7601 E TREASURE DR SUITE 1924 NORTH BAY VILLAGE, FL 33141 STE 2536 US

N MIAMI BEACH, FL 33160 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: 04/27/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

BENITEZ, PEDRO BENITEZ, PEDRO Name: Name:

7601 E TREASURE DR SUITE 1924 16485 COLLINS AVE STE 2536 Address: Address: City-St-Zip: NORTH BAY VILLAGE, FL 33141 City-St-Zip: N MIAMI BEACH, FL 33160

() Delete Title: Title: SD (X) Change () Addition

Name: BENITEZ, ROSA Name: BENITEZ, ROSA

7601 E TREASURE DR SUITE 1924 Address: 16485 COLLINS AVE STE 2536 Address: NORTH BAY VILLAGE, FL 33141 N MIAMI BEACH, FL 33160 City-St-Zip: City-St-Zip:

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: PEDRO A BENITEZ PD 04/27/2007