

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000091119

Entity Name: RAFAIVON CORP.

FILED
Apr 11, 2009
Secretary of State

Current Principal Place of Business:

5340 NW 4 ST
MIAMI, FL 331264911

New Principal Place of Business:

Current Mailing Address:

5340 NW 4 ST
MIAMI, FL 331264911

New Mailing Address:

FEI Number: 20-5653909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALACIOS, IVON
5340 NW 4 ST
MIAMI, FL 331264911 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PALACIOS, IVON
Address: 5340 NW 4 ST
City-St-Zip: MIAMI, FL 331264911

Title: VP () Delete
Name: LOPEZ, CARLOS R
Address: 5340 NW 4 ST
City-St-Zip: MIAMI, FL 331264911

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: () Change () Addition
Name:
Address:
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: IVON PALACIOS

PD

04/11/2009

Electronic Signature of Signing Officer or Director

Date