FILED Apr 28, 2008 8:00 am Secretary of State

2008	FOR	PROF	IT C	ORP	ORA'	TION
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Pincepal Place of Business Moling Address 22 SHADOW VIEW CRCLE MITLAND, FL 32751 US 2. Pincepal Place of Business - No P.O. Box # AIT REPORT SUBJECT SUBJ	DOCUMENT # P06000095378 1. Entity Name RPL CONSTRUCTION INC					Secretary of State 04-28-2008 90323 031 ***150.00					
Suite And 1, etc. Suite And 1,	2812 SHADO	IW VIEW CIRCLE	2812 SHADOW VIEW C					·			
Suite, Apt # 105 Apt # 105 City & State Al Tamonic Springs FL Al			3. Mailing Address		0						
Apt # 10.5 Chy & State A I to monte Springs FL Applied for Applie									E(15E(1) (ES)		
Altomork Springs II Attamork Springs II 20-5238658 Not Applicable Size Additional Fee Properties 6. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent ACCOUNT BOOKKEEPING CORP SSID LAKEHURS II DR STE 246 ORLANDO, LL 32819 8. The above named with submits this statement for the purpose of changing its registered office or registered agent. Size Additional Fee Properties SIGNATURE Springs II DR STE 246 FILE NOWILL FEE IS \$150.00 9. Election Campaign Financing Trust Fund Commbinion. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS III. NAME SIRE! ADDRESS OFFI-SIZE OF			Apt # 105								
8. Name and Address of Current Registered Agent 7. Name and Address of Name Registered Agent 7. Name and Address of Name Registered Agent 7. Name and Address of Name Registered Agent 8. The above named either sixthers the statement for the purpose of changing its registered office or registered agent, of both, n the State of Ronda. I am familiar with, and eccept into obligations of registered agent. 8. The above named either sixthers the statement for the purpose of changing its registered office or registered agent, of both, n the State of Ronda. I am familiar with, and eccept into obligations of registered agent. 8. Girst Name Special Registered Agent Special Registered Agent Special Registered Special Registered Agent Registered Agent Special Registered Agent Registered Agent Special Registered Agent	Altan	ronde Springs FL	Altamonte Springs H								
ACCOUNT BOOKKEEPING CORP STE 246 ORLANDO. L. 32819 8. The above ramed driver submits the statement for the purpose of changing its registered agent, of both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. In the obligations of registered agent and telf resolution. Delete Title 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11. 10. OFFICERS						5. Certificate	of Status Desired				
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SIGNATURE SQUEAM, Typic of SMADE Inspirated agent and set if acceleration INOTE: Registered apent inspirate ins	8. The above	named entity submits this statement for	the purpose of changing its	registered	office or register	ed agent, of bo	oth, in the State of Flo		and accept		
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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 of 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 leceiveryor 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: 4/23/08 407-427-5221 SIGNATURE AND TYPED OR PENTED NAME OR SIGNING OFFICER OR DIRECTOR Date Da											