2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007
Secretary of State

DOCUMENT# P06000151355

Entity Name: RSL PARALEGAL SERVICES, CORP.

Current Principal Place of Business:

225 SW 99TH AVE
MIAMI, FL 33174

New Principal Place of Business:

Current Mailing Address:

225 SW 99TH AVE
MIAMI, FL 33174

New Mailing Address:

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DIAZ, SONIA
225 SW 99TH AVE
MIAMI, FL 33174 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: P ( ) Delete
Name: GOMEZ, ROSA E
Address: 243 SW 102ND CT
City-St-Zip: MIAMI, FL 33174

Title: V ( ) Delete
Name: RODRIGUEZ, LOURDES
Address: 2001 NW 123RD ST
City-St-Zip: MIAMI, FL 33167

Title: ST ( ) Delete
Name: DIAZ, SONIA
Address: 225 SW 99TH AVE
City-St-Zip: MIAMI, FL 33174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: SONIA DIAZ ST 04/30/2007

Electronic Signature of Signing Officer or Director — Date