

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000038710

FILED
Apr 30, 2008
Secretary of State

Entity Name: RP MARQUEZ ENTERPRISES INC.

Current Principal Place of Business:

290 174 ST - # 164
SUNNY ISLES BEACH, FL 33160

New Principal Place of Business:

290 174 ST - # 408
SUNNY ISLES BEACH, FL 33160

Current Mailing Address:

290 174 ST - # 164
SUNNY ISLES BEACH, FL 33160

New Mailing Address:

290 174 ST - # 408
SUNNY ISLES BEACH, FL 33160

FEI Number: 20-8804184

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NOVARIO-MARQUEZ, PAULA
290 174 ST - # 164
SUNNY ISLES BEACH, FL 33160 US

Name and Address of New Registered Agent:

NOVARIO-MARQUEZ, PAULA
290 174 ST - # 408
SUNNY ISLES 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:

04/30/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: MARQUEZ, RAFAEL A
Address: 290 174 ST - # 164
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VPSD () Delete
Name: NOVARIO-MARQUEZ, PAULA
Address: 290 174 ST - # 164
City-St-Zip: SUNNY ISLES BEACH, FL 33160

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change () Addition
Name: MARQUEZ, RAFAEL A
Address: 290 174 ST - # 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VPSD (X) Change () Addition
Name: NOVARIO-MARQUEZ, PAULA
Address: 290 174 ST - # 408
City-St-Zip: SUNNY ISLES BEACH, FL 33160

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: RAFAEL A. MARQUEZ

MR.

04/30/2008

Electronic Signature of Signing Officer or Director

Date