

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000039312

**FILED**  
**Mar 25, 2011**  
**Secretary of State**

**Entity Name:** R & L SERVICES OF SOUTH DADE, INC.

**Current Principal Place of Business:**

12421 SW 190 TERRACE  
MIAMI, FL 33177

**New Principal Place of Business:**

**Current Mailing Address:**

12421 SW 190 TERRACE  
MIAMI, FL 33177

**New Mailing Address:**

**FEI Number:** 27-2525316

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MARIAS INCOME TAX & ACCOUNTING SERVICES IN  
4693 NW 199 STREET  
MIAMI GARDENS, FL 33055 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

**OFFICERS AND DIRECTORS:**

**Title:** P,S  
**Name:** BOWEN, RAUL  
**Address:** 12421 SW 190 TERRACE  
**City-St-Zip:** MIAMI, FL 33177

**Title:** VP,T  
**Name:** BOWEN, MARIANA  
**Address:** 12421 SW 190 TERRACE  
**City-St-Zip:** MIAMI, FL 33177

I hereby 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 all other like empowered.

**SIGNATURE:** RAUL BOWEN

P,S

03/25/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date