


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Aug 29, 2005 08:00 AM
Secretary of State

DOCUMENT # P95000049554 1. Entity Name RMC SPECIALTIES, INC.	
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Principal Place of Business 1703 N DALE MABRY LUTZ, FL 33548	Mailing Address 1703 N. DALE MABRY LUTZ, FL 33548
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DO NOT WRITE IN THIS SPACE



08242005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3322195	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BREWSTER, DAVID
12421 N. FLORIDA AVENUE
STE. B-125
TAMPA, FL 33612

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD CHRISTIAN, RENEE 1703 N DALE MABRY LUTZ, FL 33548
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or 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 receiver or 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: RENEE CHRISTIAN RENEE CHRISTIAN 8/24/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 813/933-8260