

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000056465

Entity Name: R.C. PLANTS, INC.

FILED  
Jan 14, 2008  
Secretary of State

## Current Principal Place of Business:

16343 S.W. 256 STREET  
HOMESTEAD, FL 33031

## New Principal Place of Business:

## Current Mailing Address:

16343 S.W. 256 STREET  
HOMESTEAD, FL 33031

## New Mailing Address:

FEI Number: 65-0609401

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RALPH COLON  
16343 SW 256TH ST  
HOMESTEAD, FL 33031 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: D ( ) Delete  
Name: COLON, RALPH  
Address: 16343 S.W. 256TH ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: COLON, RALPH  
Address: 16343 S.W. 256TH ST.  
City-St-Zip: HOMESTEAD, FL 33031

Title: VP ( ) Change (X) Addition  
Name: COLON, LILY T  
Address: 16343 SW 256 ST  
City-St-Zip: HOMESTEAD, FL 33031

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: RALPH COLON

PRE

01/14/2008

Electronic Signature of Signing Officer or Director

Date