2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000035546

1. Enlity Name

R.C.T. ENGINEERING, INC.



Principal Place of Business Ma

701 NORTH POINT PARKWAY SUITE 310

WEST PALM BEACH, FL 33407

Mailing Address

701 NORTH POINT PARKWAY SUITE 310 WEST PALM BEACH, FL 33407

FILED Mar 28, 2005 08:00 AM Secretary of State



02282005

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0666245

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RAYSON, JOHN C ESQ 2400 EAST OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33306

DO NOT WHITE IN THIS SPACE

8. The above the obliga	e named entity submits this statement for the patients of registered agent.	purpose of changing its reg	stered office or registered	agent, or bot	h, in the State of Florida. I am familiar with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Reg	elered Agent signature required wh	en reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
10.	OFFICERS AND DIREC	TORS				
TITLE NAME	PDS TYLER, RALPH S			•	·	
STREET ADDRESS CITY-ST-ZIP	18101 SHELBURNE CLEVELAND HEIGHTS, OH 44118	_			The second company of the second company of the second	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD OVERSTREET, E. LOUIS 575 W. MADISON STREET CHICAGO, IL 60661				000000279145 09/28/05-80057-003 158,75	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BURPHY, JAMES V 5241 CEDAR LAKE RD., APT, 4-9 BOYNTON BEACH, FL 33437			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY - 51 - ZIP	-			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						

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:

7-78-05