

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000035455

Entity Name: R. L. POLESE, INC.

FILED
Apr 23, 2008
Secretary of State

Current Principal Place of Business:

6066 188TH TRAIL N
LOXAHATCHEE, FL 33470

New Principal Place of Business:

6249 NW17TH ST
MARGATE, FL 33063

Current Mailing Address:

6066 188TH TRAIL N
LOXAHATCHEE, FL 33470

New Mailing Address:

6249 NW17TH ST
MARGATE, FL 33063

FEI Number: 65-0766208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLESE, RITA
6066 188TH TRAIL N
LOXAHATCHEE, FL 33470 US

Name and Address of New Registered Agent:

POLESE, RITA
6249 NW 17TH ST
MARGATE, FL 33063 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: RITA L POLESE

04/23/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POLESE, RITA L
Address: 6066 188TH TRAIL N
City-St-Zip: LOXAHATCHEE, FL 33470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: POLESE, RITA L
Address: 6249 NW 17TH ST
City-St-Zip: MARGATE, FL 33063

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: RITA L POLESE

P

04/23/2008

Electronic Signature of Signing Officer or Director

Date