


2005 FOR PROFIT CORPORATION  
ANNUAL REPORT

**FILED**  
**Mar 26, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S09669</b>		
1. Entity Name R C S VENTURES, INC.		
Principal Place of Business 8730 MIDNIGHT PASS RD. #204A SARASOTA, FL 34242	Mailing Address ATT DA CROMARTY 250 SYDENHAM ST APT 207, LONDON ONTARIO CANADA N6A 5S1,	

**DO NOT WRITE IN THIS SPACE**

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03182005 No Chg-P CR2E034 (10/03)

4. FEI Number NOT APPLICABLE	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

SAVARY, JOHNSON S.  
DYKEMA GOSSETT  
240 S. PINEAPPLE AVENUE  
SARASOTA, FL 34230-6948

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

**FILE NOW!!! FEE IS \$150.00**  
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CROMARTY, DONALD A. 8730 MIDNIGHT PASS #203A SARASOTA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CROMARTY, MAXIE 8730 MIDNIGHT PASS #203A SARASOTA, FL
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03/26/05-80022-023 150.00

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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:** DONALD A. CROMARTY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 March/05 15194348052  
Date Daytime Phone #

0-19413491857