FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # V05701

RC FINANCIAL SERVICES, INC.

(0)

Mailing Address

FILED May 01 1997 8:00am Secretary of State



871 N.W. 20TH COURT MIAMI FL 33125		871 N.W. 20TH COURT MIAMI FL 33125-3553				
					3, Date Incorporated or Qualified 01/10/1992	3a. Date of Last Report 03/27/1996
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt. #, etc.		26 Suite, Apt #, etc.		65-0440543	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State	₄ <u>.</u>		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country Zip 25 29 30 9. Name and Address of Current Registered Agent		Gounte 30	y 	Statutes ☐ Yes ☐ No Statutes ☐ Yes ☐ No	
A1118		nt Hegistered Agent	8.	Name	10. Name and Address of New Re	gislered Agent
	PLES, ROLANDO A.W. 20TH COURT		ļ			
	I FL 33125		82 Street Add		lress (P.O. Box Number is Not Acceptab	le)
			84			DE Zin Codo
			81	City		FL 85 Zip Code
office or reg agent. I am	othe provisions of Sections 607 085 gistered agent, or both, in the State of familiar with, and accept the oblig	e of Florida. Such obange wa	as authorized h	v the coroora	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
SIGNATURE 5	Ignature, typed or printed name of registered ag	est and tite stapportable (NOTE: Registered Ap	jeni signatare requ	ireo when reansfahing)	DATE
12.		ID DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC	
	PTS	☐ DELETE	1.1 1/11(V		Change 🔼 Addition
NAME	CHAPLE, ROLANDO 871 N.W. 20TH COURT		1.2 NAME		HAPLE, MERALDO	•
	MIAMI FL		1.3 SIRH 1.4 COY-		71 N.W. 20th COURT IAMI, FLORIDA 3312	
TITLE	IN WILL TO	DELETÉ	2.1 111LE	51-70	IAMI, FLORIDA 3312	Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2 3 STREE	LADDRESS		
CITY-ST-ZIP			2 4 C(1)	S1 - Z(P		
TITLE		DELETÉ	3.1 1111.5			☐ Change ☐ Addition
NAME			3 2 NAME			
STREET ADDRESS				22 PAGGA 1		
CITY-ST-ZIP TITLE		DELETE	3.4 CHY 4.1 THE	S1 · ZIP		Change Addition
NAME			4. 2 NAM			E onenge E Adulton
STREET ADDRESS			•	LADDRESS		
CITY-ST-ZIP			4.4 CHIY-			e e
TITLE		DELETE	511016			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREE	1 ADDRESS		
CITY-SY-ZIP		and the second of the second o	5,4 CITY-	S1-7IP		
TITLE		DELETE	611111			Change Addition
NAME			6.2 NAME		·	
STREET ADDRESS				1 ADDRESS		
CITY-ST-ZIP			6.4 CITY -	ST-7IP	•	

I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on attachment with an address.