

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

FILED
May 28 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 480690 (7) <i>n/c 4-2-98</i>			
1. Corporation Name R&M LOGISTICS CORP.			
Principal Place of Business 12280 NE 14TH AVE N MIAMI FL 33161		Mailing Address 12280 NE 14TH AVE N MIAMI FL 33161	
2. Principal Place of Business 21 16400 N.W. 2nd Ave. Suite, Apt. #, etc. 22 Suite # 203 City & State 23 MIAMI FLORIDA Zip 24 33169		2a. Mailing Address 25 16400 N.W. 2nd Ave. Suite, Apt. #, etc. 27 Suite # 203 City & State 28 MIAMI, FLORIDA Zip 29 33169	
9. Name and Address of Current Registered Agent OSHEROFF, MARC A 12280 NE 14TH AVE NORTH MIAMI FL 33161-3521		10. Name and Address of New Registered Agent 81 Name MARC A. OSHEROFF 82 Street Address (P.O. Box Number is Not Acceptable) 16400 N.W. 2nd Ave. 83 Suite # 203 84 City MIAMI FL 85 Zip Code 33169	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE: <i>[Signature]</i> MARC A. OSHEROFF <i>Pres. & Co.</i> DATE: 4/12/98			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MITCHELL, ROBERT S JR 12280 NE 14TH AVENUE NORTH MIAMI, FL 00000	☐ DELETE ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OSHEROFF, MARC A 12280 NE 14TH AVENUE NORTH MIAMI, FL 00000	☐ DELETE ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SUMMERS, KEITH 12280 N.E. 14TH AVE. N. MIAMI FL	☒ DELETE ☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ DELETE	☐ Change ☐ Addition	
14. 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 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 an attachment with an address.		800002540338 -05/29/98--01015--016 ***158.75 PE 5-28	

CR2E034 (10/97)