


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # H03421
 1. Entity Name
 RMS SYSTEMS, INC.



Principal Place of Business Mailing Address
 649 SW WHITMORE DR 649 SW WHITMORE DR
 PORT ST. LUCIE, FL 34984-3567 PORT ST. LUCIE, FL 34984-3567



03312005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2415839	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
 BUTERA, JOSEPH G. JR.
 649 SW WHITMORE DR
 PORT ST. LUCIE, FL 34984-3567

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

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	S BUTERA, FOREST 1501 SW MERIDIAN AVE. PORT ST LUCIE, FL 34953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BUTERA, JOSEPH G. 1501 S.W. MERIDIAN AVE. PORT ST. LUCIE, FL 34953
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 04/04/05-80058-014 150.00

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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)(f), 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:  **Joseph G. Butera, Jr.** 3/31/05 772-879-9400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #