

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

09-04-2002 90096 033 ****61.25
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DOCUMENT # P0000077044

1. Entity Name

R & M RETAIL GROUP, INC.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4923 SHERIDAN STREET

Suite, Apt. #, etc.

3. Mailing Address

4923 SHERIDAN STREET

Suite, Apt. #, etc.

City & State

HOLLYWOOD, FL

City & State

HOLLYWOOD, FL

Zip

33021

Country

Zip

33021

Country

4. FEI Number

65-1031544

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

SAMIR ALKISHAWI

Street Address (P.O. Box Number is Not Acceptable)

4923 SHERIDAN STREET

City

HOLLYWOOD

FL

Zip Code

33021

8. The above named entity admits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Sam Alkishawi
Signature, typed or printed name of registered agent and file if applicable.

SAMIR ALKISHAWI

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PRESIDENT	SAMIR ALKISHAWI	3350 EMERALD POINT DRIVE	HOLLYWOOD, FL 33021				
VICE-PRESIDENT	MARY ALKISHAWI	3350 EMERALD POINT DRIVE	HOLLYWOOD, FL 33021				

**DO NOT WRITE
IN THIS SPACE**

Samir

CR2E034B (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Samir Alkishawi*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 954-985-6464
Daytime Phone #