

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000047682

Entity Name: RHINE DEVELOPMENT, INC.

FILED
Feb 13, 2009
Secretary of State

Current Principal Place of Business:

2499 GLADES ROAD
SUITE 210
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

6550 NORTH FEDERAL HIGHWAY
SUITE 210
FORT LAUDERDALE, FL 33308

New Mailing Address:

6550 NORTH FEDERAL HIGHWAY
SUITE 522
FORT LAUDERDALE, FL 33308

FEI Number: 81-0617931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTOR, SAMUEL J
2499 GLADES ROAD
SUITE 210
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BLATT, ROBERT
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: BISTRICER, HERMAN
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BLATT, ROBERT
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

Title: D (X) Change () Addition
Name: BISTRICER, SIMONE
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

Title: D () Change (X) Addition
Name: BISTRICER, SUZANNE
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

Title: S () Change (X) Addition
Name: GANS, MARK
Address: 2499 GLADES ROAD, SUITE 210
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT BLATT

P

02/13/2009

Electronic Signature of Signing Officer or Director

Date