FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Feb 26 1998 8:00am *PROFIT ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # P93000034142 (8) RFP CORP. Principal Place of Business Mailing Address 88 PARK AVE 88 PARK AVE NUTLEY NJ 07110 NUTLEY NJ 07110 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/11/1993 2. Principal Place of Business 2a. Mailing Address Applied For 65-0408492 21 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees 28 Trust Fund Contribution Country Zip Country Z_{1D} 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **C T CORPORATION SYSTEM** 1200 S PINE ISLAND RD Street Address (P.O. Box Number is Not Acceptable) **PLANTATION FL 33324** 83 84 City 85 Zip Code 11. Pursuant to the previsions 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 (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 11100 FARERI, ANTHONY 1.2 NAME NAME 11025 NW 19TH MANOR STREET ADDRESS 1.3 STREET ADDRESS CORAL SPRINGS FL 33071 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition Channe TITLE 2.1 1/1/1€ ROCKWELL, RICHARD NAME 2.2 NAME **88 PARK AVE** STREET ADDRESS 2.3 STREET ADDRESS **NUTLEY NJ** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Addition TITLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. C(TY - ST - Z(P DELETE Change Addition TITLE 4.1 THILE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition 51 TITLE 5.2 NAME NAME STREET ADDRESS **5 3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE

6.2 NAME

14. Thereby certify that the information supplied with the filing closs not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the Information indicated on this annual report or suppliemental 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 ortrusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 of changed, or on an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

2/10/00