

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Mar 30, 1999 8:00 am  
Secretary of State

03-30-1999 90012 028 \*\*\*150.00

DOCUMENT # F93000004082

1. Corporation Name

RBG INTERNATIONAL, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
154 WEST HUBBARD STREET  
SUITE 250  
CHICAGO IL 60610

Mailing Address  
154 WEST HUBBARD STREET  
SUITE 250  
CHICAGO IL 60610

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

28 Zip Country

25

29 30

3. Date Incorporated or Qualified

09/08/1993

4. FEI Number

36-3872581

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYS STREET  
SUITE 105  
TALLAHASSEE FL 32301

81 Name

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

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME GOLDFINE, ROBERT S  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

TITLE V  
NAME BLOCK, BRUCE  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

TITLE V  
NAME ROSS, ROBERT  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

TITLE V  
NAME MOHR, BARBARA  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

TITLE D  
NAME ROSS, RENEE  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

TITLE D  
NAME BLOCK, ARLENE  
STREET ADDRESS 154 WEST HUBBARD STREET  
CITY-ST-ZIP CHICAGO IL 60610

☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-24-99 312-464-0000