1. Entity Nam	MENT # 223993 RHA HOUSE, INC	XEAR	20	e B		10 2 4	,	
Din-al Dia-		Mailing Address		_ -	-	•		
Principal Place of Business		428 COLLINS AVENUE				06 MAR 20 PM	3: 55	
428 COLLINS AVENUE MIAMI BEACH FL 33139		MIAMI BEACH FL 33139-6655			}	OUTIAN ESTITI		
							. , , , 1 t. 	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		U		IN THIS SPACE	12.000	
City & State		City & State		/4. F	59-6071210		Applied For I lot Applicable	
Z ¹ 0	Country	Zip	Coun	itry		ertificate of Status Desired	Fee Req	Additional uired
Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name				
REITMAN, OFELIA 428 COLLINS AVE #9				Street Address (P.O. Box Number is Not Acceptable)				
MIAMI BEACH FL 33139								
	,		_	City			FL Zip	Code
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.								
SIGNATURE Signature, typod or printed name of recystored agent and title if applicable. (INOTE: Registered Agent signature required when reinstating) DATE								
					o sanerros.	into any		 -
9. This corporation is eligible to satisfy its Intangible FILE NOW!!! F Tax filing requirement and elects to do so. After MAY 1, 2009) 🎏 Fee	will be \$550.00		 Election Campaign Finar Trust Fund Contribution. 		5.00 May Be Ided to Fees
	ria on back)	Make Check Payal		epartment of Sta				
11.	OFFICERS AND D	Delete	12.		ADI	DITIONS/CHANGES TO OFFIC	ERS AND DIRECT	
HANE	ZALDIVAR JR RAUL	C Delets	NAG	1			_	_
	428 COLLINS AVE			ET ADDRESS	ľ	80007081)4/18/0601043(.かごうご 117 **150	. 00
TITLE	MIAMI BEACH FL	☐ Delete	TITLE	-ST-ZIP			Chan	
MAME	ZALDIVAR SR RAUL.	CT Desert	HALL	t				ge 🔲 Addition
STREET ADDRESS	428 COLLINS AVE	•) I	et address				
CITY-S1-ZIP	MIAMI BEACH FL		 }	-ST-ZIP				
TITLE VALSE	ST RETIMAN OFELIA	☐ Delete	TITLE	I			☐ Chan	ge 🔲 Addition
STREET ADDRESS ,	428 COLLINS AVE		lt i	ET ADDRESS				•
CITY-ST-ZIP	MIAMI BEACH FL		CITY	ST-7IP				·
TOTELE NATAE	· · ·	☐ Delete	HAME				Chan	ge 🔲 Addition
STPEET ADDRESS			13	ET ADDRESS				
CHY-ST-ZIP			CITY-	ST-ZIP				
Tifte Name		Oelete	TITLE				Chan	pe 🗌 Addition
STREET ADDRESS	·		N	T ADDRESS				
CHY-SI-JR			CITY-	ST-ZIP				
TITLE HALIF	·	☐ Delete	TITLE	i i			Chang	e 🗋 Addition
STREET ADDRESS			11	T ADDRESS		•		
C11A-21-3 n ,		·		ST-ZIP				
13. Thereby 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 12 if changed, or on an attachment with an address, with all other like empowered.								
SIGNATURE: Office Cuture OF FELIA REITMAN 3/12/2006								