FILED STATE

Appendix	DOCUMENT # A0200001094 1. Entity Name RMAA HOLDINGS, LTD.					SION OF CORPORATIONS AUG 18 AM 8: 14	My	3/20	
Sule. Apt. #, etc. Sule. Apt. #, etc. Sule. Apt. #, etc. Sule. Apt. #, etc. Sule. Apt. #, etc. Sule. Apt. #, etc. Sule. Apt. #, etc. A FEI transfer 49 0.2 Applies For Inval Ap	2600 N. MILITARY TRAIL, STE. 290 2600 N. MILITARY TRAIL, S			-	0				
City & State	Principal Place of Business								
Second S	Suite, Apt. #, etc. Suite, Apt. #, etc.				DUE BY MA	Y 1, 2003			
S. Certificate of Status Desired Foo Required ELLIS, SETH E ESC SETH E. ELLIS, P.A. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code City FL	City & State City & Sta		City & State	le		4. FEI Number 01-0744902			
ELLIS, SETH E ESQ SETH E. ELLIS, P.A. Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code 6. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florica. I am familiar with, and accept the obligation of registered agent, or both, in the State of Florica. SIGNATURE 9. Capital Controllators A CENERAL PARTISER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE NOTE: General Partisers MAY NOT be changed on the form; an amendment must be filed to change a period partier. 12. CENERAL PARTISER IN PROPRIATION 13. ADDRESS CHANGES ONLY 14. DECEMBER 1 15. DECEMBER 1 16. STEEL ADDRESS 17. STEEL ADDRESS 18. STEEL ADDRESS	Zip	·	,	Count	ry	·	Fe	e Required	
SETH E. ESLO, P.A.		6." Name and Address of Current F	Registered Agent		****	7. Name and Address of New Ri	gistered Ag	ent	
A. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. I am familiar with, and accept the obligations of registered agent. SIGNATURE	SETH E. ELLIS, P.A. 2600 N. MILITARY TRAIL, STE. 290			_					
THE Obligations of registered agent. SIGNATURE					City		FL	Zip Code	
Capital Controllutions Signature, injusted in the disquarest appoint and the PayActable Controllutions Signature Sig									
A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12.	SIGNATURE ————————————————————————————————————								
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filled to change a general partner. 12.									
12. GENERAL PARTNER INFORMATION 13. ADDRESS CHANGES ONLY	A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.								
NAME STREET ADDRESS CITY - ST - ZIP	12.				BIT BITTETTOTTET			G1.	
NAME STREET ADDRESS CITY - ST - 2IP	DOCUMBNT /	P02000086839		STREE	1 atimpecs	THE TAIL SECTION AND ADDRESS OF THE TAIL SECTION ADDRESS OF THE TAIL SECTION AND ADDRESS OF THE TAIL SECTION ADDRE			
NAME STREET ADDRESS CITY - ST - 2IP		RMAA MANAGEMENT CORP., INC. 2600 N. MILITARY TRAIL, STE. 290		J					
NAME STREET ADDRESS CITY - ST - 2IP				CITY -	S1-2/P			003	
STREET ADDRESS CITY - ST - 2IP CITY - ST - 2IP				STREE	T ADDRESS			**141.25 S	
NAME	STREET ADDRESS	REET ADDRESS		CITY -	ST-21P	,			
CITY-S1-2IP				STREE	1 ADDRESS		- 1		
NAME STREET ADDRESS CITY-ST-2IP COCUMENT / NAME STREET ADDRESS CITY-ST-2IP				CITY -	S1 - 21P				
CITY - ST - 2IP DOCUMENT / NAME STREET ADDRESS CITY - ST - 2IP		_		STREE	1 ADDRESS				
NAME STREET ADDRESS CITY - ST - ZIP DOCUMENT # NAME STREET ADDRESS CITY - ST - ZIP				CITY -:	ST-21F .	+			
CITY-S1-2 P	NAME .			stree	TADDRESS				
NAME STREET ADDRESS CITY -51-2IP CITY -51-2IP				City - s	S1 - 21P				
CITY - 51 - 2IP				STREET	T ADDRESS				
CIT-SI-2P				CITY -	51 - 21P				
		earthy that the information overtices	his filing dans not minute.			ation 110.07/2003 Floring State 1	Lumbana and	that the internal	

the receiver or trustee empowered to execute this report as required by Chapter 620. Florida Statutes

SIGNATURE:

STAPLE CHECK HERE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Oaki

Davime Phone #

RMAA HOLDINGS, LTD. 2600 NORTH MILITARY TRAIL, STE 290 BOCA RATON, FL 33431

May 16, 2003

State of Florida
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: UNIFORM BUSINESS REPORT

RMAA HOLDINGS, LTD

DOCUMENT # A02000001094

F.E.I.N. # 01-0744902

Dear Sir/Madam:

Please be advised that we did not receive the pre printed/original Uniform Business Report Packet for 2003 for the above-mentioned corporation.

Enclosed please find a check in the amount of \$141.25 for the original fee with the signed report.

Thank you for your cooperation in this matter.

Sincerely,

Richard Atkinson General Partner

enclosures - as mentioned