## 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

## DOCUMENT # F9800005451

1. Corporation Name

RIZZO RESEARCH INTERNATIONAL INC.

## **FILED** Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90007 031 \*\*\*\*\*8.75 03-17-1999 90007 032 \*\*\*150.00

Principal Place of Business Mailing Address								1	MAT ATTEN HER LEAT
156 5TH AVENUE STE 701 156 5TH AVENUE STE 701									
NEW YORK NY 10010 NEW YORK NY 10010					DO NOT WRITE IN THIS SPACE				
							3. Date incorporated or Qualifed	13 31 AGE	<del></del>
							09/29/1998		
2 Principal P	lace of Business	2a Maii	ing Address				4. FEI Number		Applied For
21	nce of Business	26	g . idaresa				13-3703791	<u> </u>	Not Applicable
Suite, Apt	#. etc.	-	e, Apt. #, etc.					\$8.75	Additional
22		27					5. Certificate of Status Desired	Fee	Required
City & State City & State			& State				6. Election Campaign Financing	\$5.0	<b>0</b> мау Ве
23		28					Trust Fund Contribution	Adde	d to Fees
Zip	Country	Zıp		Count	гу		8. This corporation owes the current year	ntangible	_
24	25	29		30			Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curr	rent Registered	Agent				10. Name and Address of New Registere	d Agent	
7410.4	I loce b			a	II Nar	ne			
VIDAL, JOSE R				8	2 Stre	et Addre	ss (P.O. Box Number is Not Acceptable)		
300 SEVILLA AVE.			L.	_					
COR	AL GABLES FL 33134			8	13				
				8	4 City	,	F	85 Zi	p Code
		2502 15	OD Flacida Ctatut	a the she		od sorno	ration submits this statement for the purpose	_	its registered
office or re	paistered <del>age</del> nt or both in the Sta	ate of Florida, Su	ich change was ai	uthorized b	ov the co	orporation	s board of directors. I hereby accept the app	ointment as	registered
agent. La	m familiar with, and accept the obli	igations of, Secti	ion 607.0505, Floi	rida Statute	es.		918100		
SIGNATURE			- INOTE	Provetorod As	ant expert	ire required	when reinstating) DATE		
12.	Stgnature, typed or printed name of registered a OFFICERS	AND DIRECTOR	*	13.	Jeni signati	are required	ADDITIONS/CHANGES TO OFFICERS	AND DIREC	TORS IN 12
TITLE	PCD		☐ DELETE	11 TITLE	Ē			Chang	ge Addition
NAME	RIZZO, ROBERTO			1.2 NAMI	E				
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14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Flonda 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 changes, or on an attachment with an address, with all other like empowered.

SIGNATURE!