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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H84516

R & C INTERNATIONAL, CORP.

(4)

## FILED Jan 16 1997 8:00am Secretary of State



Principal Place 250 BIRD ROAL SUITE 105 CORAL GABLES US	•	Mailing Address  250 BIRD ROAD  CUITE 105  CORAL GABLES FL-881-4  US	eso bird road Cuite-195 Coral gables fl-88148-1424		3. Date Incorporated or Qualified 3a. Date of Last Report 01/30/1996		
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	pplied For
21 341	Viscaya Ave.	26 P. O. Box 143057			59-2602492	Not Applicable	
Suite, Apt 22		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required		
City & State  23 Coral Gables, Florida		a 28 Coral Gab	les,	FL	Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip	Country	Zip <b>33114</b> -	Cou	ntry	8. This corporation has liability for i		s. 199.032,
24 3313	4 25 USA 9. Name and Address of Curre	29 3057	30	USA	Florida Statutes  10. Name and Address of New Re	Yes No	
GARCIA, RAMON J.  -250 BIRD ROAD P. O. Box 143057  -SUFFE-105 CORAL GABLES FL 80146 33114-3057				81 Name Ramon J Garcia 82 Street Address (P.O. Box Number is Not Acceptable) P. O. Box 143057 83			
			İ	84 City	al Gables,	FL 85 Zip	Code 114-305
office or ragent Fa	egistered agent, or both, in the State in familiar vitte, and accept hyperist.  Signature, typed or period rame of paymered agent.	of Florida Such change was jations of, Section 607.0505, I	s authorized Florida Stat	ove-named corporal by the corporal utes.  Agent signature requi	poration submits this statement for the p tion's board of directors. I hereby accep of when reinstating)  ADDITIONS/CHANGES TO OFFICE	the appointment as	s registered
TITLE	DP	DELETE	1.1 10	LE	Abbillollo, of Altage To of the	☐ Change	Addition
NAME	GARCIA, RAMON J.		1.2 NA	ME			
STREET ADDRESS	341 VISCAYA AVE.		1.3 ST	REET ADDRESS			
CITY-ST ZiP	CORAL GABLES FL		1 4 CF	Y-ST-ZIP			
TITLE	DST	☐ DELETE	21 [1]	LE		☐ Change	Addition
NAME	GARCIA, MARIA C.		2.2 NA	ME			
STREET ADDRESS	341 VISCAYA AVE.		2.3 ST	REET ADDRESS			
CITY-SI-ZIP	CORAL GABLES FL	DELETE		TY-ST-ZIP		Change	Addition
TITLE		ן אנרכונ	3.1 10 3.2 NA			L Change	☐ Mudicoli
NAME STREET ADDRESS			1	ME REET ADDRESS			
CITY-ST-ZIP			•	TY-ST-ZIP			
TITLE		☐ DELETE	4.1 711			Change	Addition
NAME			4. 2 N			_	
STREET ADDRESS			4 3 ST	REET ADDRESS			
CITY-ST-ZIP			4 4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	5111	TE		Change	Addition
NAME			5 2 NA	1			
STREET ADDRESS				REET ADDRESS	•		
CITY - ST - 7IP		DELETE		IY-ST-ZIP		Chann	Additon
TITLE		DELETE	61 Tf			☐ Change	Addition
NAME			62 NA	1			
STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP	we could that the information countil	ad with this filing dose not aw		Y-ST-ZIP	d in Section 119.07(3)(i), Florida Statute	e. I further codify the	t the

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 my recorder or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 19 if changed, or on an address.

SIGNATURE: