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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J79868

(2)

Corpora	tion Name	_		•
R.7.R.	INTERNATIO	NAI.	INC.	

Principal Place of Business Mailing Address 8362 PINES BLVD STE 341 8362 PINES BLVD STE 341 PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024-6600 3. Date Incorporated or Qualified 3a. Date of Last Report 06/26/1987 04/05/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 59-2846250 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional X 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Z_{10} Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 30 Yes No 29 Fiorida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name EPSTEIN, BARUCH B. 8362 PINES BLVD STE 341 82 Street Address (P.O. Box Number is Not Acceptable) PEMBROKE PINES FL 33024 83 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 lamiliar 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS (96/6) 13. DCPS DELETE Addition TITLE 1.1 TITLE Change EPSTEIN, BARUCH B. NAME 1.2 NAME 8362 PINES BLVD STREET ADDRESS 1.3 STREET ADDRESS PEMBROKE PINES FL CITY-ST-ZIE 1.4 CITY - ST - ZIP TITLE DELETE 2.1 TITLE Change Addition EPSTEIN, ZOHARA NAME 2.2 NAME 8362 PINES BLVD STREET ADDRESS 2.3 STREET ADDRESS PEMBROKE PINES FL CITY - ST - ZIF 2. 4 CITY - ST- ZIP TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY - \$1 - ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADORESS 4.3 STREET ADDRESS CITY - ST- ZIP 4.4 CITY-ST-ZIP DELETE DILE 5.1 TITLE Addition NAME 5.2 NAME STREET ACCIDESS 5.3 STREET ADDRESS C:TY - ST - ZIP 5.4 CiTY - \$1 - ZiP DELETE Change TITLE 6.1 TITLE __ Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST - ZiP CITY - ST - ZIP

14. I do 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 on an attachment with an address.

1/21/1997

954-436-2910

BARUCH B. EASTEIN