

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K14620 (4)**

1. Corporation Name
R.H. CONNECTION, INC.



Principal Place of Business: **1010 W. 23RD ST. HIALEAH FL 33010**
Mailing Address: **1010 W. 23RD ST. HIALEAH FL 33010**

3. Date Incorporated or Qualified: **02/05/1988**
3a. Date of Last Report: **01/24/1995**

2. Principal Place of Business (21-24) and Mailing Address (2a-24) fields for Suite, City, State, Zip, and Country.

4. FEI Number: **65-0025205**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent
**RAMIREZ, JR., CARLOS
7410 W. 32ND LANE
HIALEAH FL 33016**

10. Name and Address of New Registered Agent
81 Name: **Ramirez, Jr. Carlos**
82 Street Address (P.O. Box Number is Not Acceptable): **360 E. 55 ST.**
83
84 City: **Hialeah** FL 85 Zip Code: **33012**

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 familiar with, and accept the obligation of, Section 607.0505, Florida Statutes.

SIGNATURE: *Carlos Ramirez* DATE: **2/12/96**

12. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> DELETE
NAME	RAMIREZ, CARLOS, JR.	
STREET ADDRESS	7410 W. 32ND LANE	
CITY- ST- ZIP	HIALEAH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	GUTIERREZ, ARAIRIS	
STREET ADDRESS	7410 W. 32ND LANE	
CITY- ST- ZIP	HIALEAH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PIT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Ramirez, Carlos Jr.	
1.3 STREET ADDRESS	360 E. 55 ST	
1.4 CITY- ST- ZIP	Hialeah, FL. 33012	
2.1 TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Ramirez, ARAIRIS	
2.3 STREET ADDRESS	360 E. 55 ST #1	
2.4 CITY- ST- ZIP	Hialeah, FL. 33012	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY- ST- ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY- ST- ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY- ST- ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY- ST- ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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, on an attachment with an address.

SIGNATURE: *Carlos Ramirez* DATE: **2/12/96** DAYTIME PHONE #: **305-888-1674**

CR2E034 (12/95)