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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

FILED
Feb 09 1998 8:00am
Secretary of State

RMB ASSOCIATES, INC.								
							ELDA I DIRIGINA	
Principal Plac	ce of Business	Mailing Address			- 1 INMINEIL uns imbid fimit immu istunt ist.	i minis minis minit dint dinti		
%RICHARD N	M. BODEN	%RICHARD M. BODEN						
6799 CALLE DEL PAZ 6799 CALLE DEL PAZ								
BOCA RATON FL 33433 BOCA RATON FL 33433					DO NOT WRITE	IN THIS SPACE		→ .
US		US			3. Date Incorporated or Qualified			
					04/24/1989		· ·	4
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	4	
21		26		65-0119617		Not Applicable	4	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		5 Additional		
22]		[27]				Required	-	
City & State		City & State		6. Election Campaign Financing	\$5.0 Adde	0 May Be		
Zip Country		Zip Country		Trust Fund Contribution		d to Fees	4	
Zip	<u>├</u> ─┐ '	Zip	-	У	8. This corporation owes or has pai			
24 25 9. Name and Address of Current		t Registered Agent	3		Personal Property Tax due June 10. Name and Address of New Rec		∐ No	4
DC.		it negistered Agent	81	Name	To, Hame and Address of New Hes	Jistered Agent		┨
	DDEN, MARK R. 199 CALLE DEL PAZ			Ivanie				
			82	Street Adda	ress (P.O. Box Number is Not Acceptab	le)	_	1
DC.	DCA RATON FL 33433		83			·····	· · · · · · · · · · · · · · · · · · ·	4
			63	<u>'</u>				
			84	City		85 Zi	p Code	7
				L		FL		1
office or	to the provisions of Sections 607.050; registered agent, or both, in the State	2 and 607.1508, Florida Statutes, of Florida. Such change was aut	tne abov horized b	e-named corp v the corporat	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing t the appointment	as registered	
agent. I a	am familiar with, and accept the obliga	ations of, Section 607.0505, Fioric	ia Statute	s.	•		•	
SIGNATURE						DATE		
12.	Signature, typed or printed name of registered age OFFICERS AND		13.	ent signatura requir	red when reinstaling) ADDITIONS/CHANGES TO OFFICE		DRS IN 12	16
TITLE	D	DELETE 1.1 TI			ABBITIONO/OFFATGES TO OFFICE	Chang		100
NAME	BODEN, RICHARD M.		1,2 NAME					Ė
STREET ADORESS	6799 CALLE DEL PAZ			T ADDRESS				[8
	BOCA RATON FL		1.4 CITY - 1					S T
CITY-ST-ZIP TITLE	D	DELETE	2.1 TITLE	51-2IP		Change	Addition	18
NAME	BODEN, JOAN M.		2.2 NAME				, Lam , radiaon	1
	6799 CALLE DEL PAZ	1		T ADDRESS				ļ
STREET ADDRESS	BOCA RATON FL		2.3 STREE 2. 4 CITY-					
CITY-ST-ZIP	D	DELETE 3,1 π		51-ZP		Change	Addition	1
NAME	BODEN, MARK R.		3.2 NAME					
STREET ADDRESS	6799 CALLE DEL PAZ			F ADDRESS				
	BOCA RATON FL							
CITY-ST-ZIP	D	☐ DELETE	3.4. CITY- 4.1 TITLE	31-4ir		Change	Addition	1
NAME	BODEN, RICHARD M. III	_ 3222.2	4. 2 NAME					
STREET ADDRESS	64 AYAMONTE		4.3 STREET	ADDRESS]
	SAN RAMON CA							
CITY-ST-ZIPTITLE		☐ DELETE	4.4 CITY - S 5.1 TITLE	DI - ZIP		Change	Addition	1
			5.2 NAME			- Ottoride		
NAME			-					
STREET ADDRESS			5.3 STREET					
CITY-ST-ZIP		5.4 Cl		si - ZIP		Change	Addition	1
TITLE								ľ
		☐ DELETE	6.1 TITLE			I1 Change	- Manitoti	
NAME STREET ADDRESS		L_I DELETE	6.1 TITLE 6.2 NAME 6.3 STREET			I Cliarge	. Manisott	

14. I 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.

561 391 6731