SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
95 JUL 31 PM 12:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L42834 (6)

1. Corporation Name
R HOLDING CORP.

Principal Place of Business
6687 NW 16TH TERR
FT. LAUDERDALE FL 33309
US

Mailing Address
1445 NE 56 CT
FORT LAUDERDALE FL 33334

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/17/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0304077 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 1020 N.W 51 St.
Suite, Apt. #, etc.
22
City & State
23 FT. LAUDERDALE
Zip
24 33309
Country
25 BROWARD

2a. Mailing Address
26 1020 NW 51 St.
Suite, Apt. #, etc.
27
City & State
28 FT. LAUDERDALE
Zip
29 33309
Country
30 BROWARD

9. Name and Address of Current Registered Agent
HOFFMAN, R
1445 NE 56 CT
FORT LAUDERDALE FL 33334

10. Name and Address of New Registered Agent
81 Name: R. HOFFMAN
82 Street Address (P.O. Box Number is Not Acceptable): 1020 NW 51 St.
83
84 City: FT. LAUDERDALE FL
85 Zip Code: 33309

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 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) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	P	11 TITLE	P	☑ Change ☐ Addition
NAME	HOFFMAN, STEVEN	12 NAME	HOFFMAN, STEVEN	
STREET ADDRESS	6257-2 BAY CLUB DRIVE	13 STREET ADDRESS	1020 NW 51 St.	
CITY · ST · ZIP	FT. LAUDERDALE FL	14 CITY · ST · ZIP	FT. LAUDERDALE, FL 33309	
TITLE	V	21 TITLE	V.P	☑ Change ☐ Addition
NAME	HOFFMAN, DARREN	22 NAME	HOFFMAN, DARREN	
STREET ADDRESS	1445 NE 56 CT	23 STREET ADDRESS	1020 NW 51 St.	
CITY · ST · ZIP	FT LAUDERDALE FL	24 CITY · ST · ZIP	FT LAUDERDALE, FL 33309	
TITLE	S	31 TITLE	S.	☑ Change ☐ Addition
NAME	HOFFMAN, ROBERT	32 NAME	HOFFMAN, ROBERT	
STREET ADDRESS	1445 NE 56 CT.	33 STREET ADDRESS	1020 NW 51 St.	
CITY · ST · ZIP	FT. LAUDERDALE FL	34 CITY · ST · ZIP	FT. LAUDERDALE, FL 33309	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY · ST · ZIP		44 CITY · ST · ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY · ST · ZIP		54 CITY · ST · ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY · ST · ZIP		64 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, or on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 7/20/95 Daytime Phone #: 493-7300

CR2E034 (3/95)

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