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

FILED Feb 20 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State **DIVISION OF CORPORATIONS** 1998 DOCUMENT # L61271 RCG ENTERPRISES, INC. Principal Place of Business Mailing Address PO BOX 162069 PO BOX 162069 MIAMI FL 33116 MIAMI FL 33116 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/30/1990 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 1172 S.Dixle Hwy 21 65-0183681 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired -430 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Coral Gables 23 Trust Fund Contribution 28 Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 33146 Occh Personal Property Tax due June 30. 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 RIBERBOIM, MYRIAM Name Myriam 10940 SW 125TH STREET 82 Street **MIAMI FL 33176** 83 84 City Zip Code oral Gables 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 Statules. **SIGNATURE** Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE RIBENBOIM, MYRIAM Ribenboim, Myniam NAME 1.2 NAME 10940 SW 125 STREET STREET ADDRESS 1.3 STREET ADDRESS 205 Cooba **MIAMI FL 33176** 143 1.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition TITLE 2.1 TITLE CHOR, HENRIQUE NAME 2.2 NAME 13400 SW 72 AVE STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33156 CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZiP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. Thereby 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.

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STREET ADDRESS

CITY-ST-ZIP