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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L78458

(1)

Mailing Address

RGS INVESTMENTS, INC.

Lam an officer or director of the appears in Block 12 or Block

SIGNATURE:

Principal Place of Business

\$411 N 32NO TER HOLLYWOOD FL 33021		3411 N 32ND TER HOLLYWOOD FL 33021-26	3411 N 32ND TER HOLLYWOOD FL 33021-2616					
•					3. Date Incorporated or Qualified 06/07/1990	3a. Date of 1 01/25/19		
· · · · · ·	lace of Business	2a. Mailing Address			4. FEI Number		Applied For	
Suite, Apt.	# Ala	Suite Apt. #, etc.			65-0201850	/ 60	Not Applicable	
22	p, cir.	······	27		5. Certificate of Status Desired	1 L/	.75 Additional ee Required	
City & State		City & State			6. Election Campaign Financing	\$!	5.00 May Be	
23		28	· · · · · · · · · · · · · · · · · · ·	<u>-</u>	Trust Fund Contribution	<u> </u>	dded to Fees	
Zip	Country	Zip	Country 30		8. This corporation has liability for in Florida Statutes	tangible tax ur Yes	nder s. 199.032,	
24	25 29 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
POP	LACK, ARIEL ESQ	······································	1	Name D	ADLACK ADIEL E	CA		
	HB SHERIDAN STREET		1	2 Street Add	Iress (P.O. Box Number is Not Acceptab	(e)		
SUITE 151					930 S. STATI		7	
HOLLYWOOD FL 33021				33				
			1	4 City	4-1-1-1-1	FL 85	Zip Code	
11. Pursuant	to the provisions of Sections 607 (0502 and 607.1508. Florida Statut	es, the abi	ove-named con	poration submits this statement for the p		333/7	
office or r	egistered agent, or both, in the St. m familiar with, and accept the ob-	ale of Florida, Such change was	authorized	by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	t the appointme	ent as registered	
	militarima wiiri, gest accopa eico ca	ngthons (ii, titiolion 607.0005, 11	onea orara	iii (JUST ADDRESS CHAN	GE - SAW	IF AGENT)	
SIGNATURE	Signature, typica or prored name of regres ~ 4		f£ Registered	Agent signature requ	ired when reinstating)	DAYE		
12.	OFFICERS /	AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE		
TITLE NAME.	EMMER, BRADFORD N.		1.1 TITU 1.2 NAN			ب ب	latige [_] Addition	
STREET ADDRESS	3411 N 32ND TER	•		EST ADDRESS				
CHY ST-ZIP	HOLLYWOOD FL	•	1	'-S1-ZIP				
TITLE	VIS	DELETE 2.17				□ cı	hange	
NAME			2 2 NAM	te				
STREET ADDRESS	3411 N 32ND TER		2.3 STR	EET ADDRESS				
CITY - S1 - ZIII	HOLLYWOOD FL			Y-ST-ZIP	***************************************		hange Addition	
TITLE	☐] DETELE		3.1 TITL 3.2 NAM)		LL CI	range Li Addition	
NAME STREET ADDRESS			1	EET ADDRESS				
C-TY - ST - ZIP				Y-ST-ZIP				
TITLE	DELETE		4.1 TITL	····		C	hange	
NAME			4 2 NAI	dt				
STREET ADDRESS			4 3 STR	EET ADDRESS			II	
CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	DE PTE		- ST - ZIP		[] A	Language Communication of the	
TITLE		∟ DELĒTE	5 1 TH L				hange L Addition	
NAME STREET ADDRESS			5.2 NAM					
STREET ADDRESS City - St - Zip				EET ADDRESS '-ST-ZIP			-	
TITLE		☐ DELETE	6 1 7171			□ C	hange Addition	
NAME			6.2 NAS]				
STREET ADDRESS			6.3 S1H	EET ADDRESS				
CITY-S1-7iF			6.4 CIT	r - S1 - 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 arrival report or suppliemental 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 deposition or the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name