2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 12, 2008 08:00 AN Secretary of State

DOCL	JMEN	JT # I	M38602
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1. Entity Name

R.M.S. INDUSTRIES, INC.



Principal Place of Business

C/O RICHARD M. SKELLY 2100 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009-3765 Mailing Address

C/O RICHARD M. SKELLY 2100 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009-3765



DO NOT WRITE IN THIS SPACE

05092008		No Chg-P	CR2E034 (11/05)		
4. FEI Number 59-2729053					Applied For
				Not Applicable	

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SKELLY, RICHARD M. 2100 HALLANDALE BEACH BLVD. HALLANDALE, FL 33009-3765

SIGNATURE

DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the pions of registered agent.	purpose of changing its registe	red office or i	registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	d applicable (NGTE: Register	ed Agent signatur	s (equired when remetating)	DATE
	LE NOWIII FEE IS \$150.00 ue by September 12, 2008	Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
10.	OFFICERS AND DIRE	CTORS			
TITLE NAME STREET ADDRESS CITY - ST- ZIP	DP SKELLY, RICHARD M 2100 HALLANDALE BEACH BLVD. HALLANDALE, FL 330093765				000000950720 06/04/08-80003-002 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP				•	06/04/08-80003-002 150. <u>0</u> 0
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12 I hereby	Cortify that the information supplied with this I on this report or supplemental apport is true poration or the receiver or fire the employee, or on an attachment with an address, with a	filling does not qualify for the en and accurate and that my sign to execute this report as requ tother like empowerd.	kemptions co ature shall ha uired by Chap	ntained in Chapter 11 ve the same legal effe oter 607, Florida Statut	 Florida Statutes. I further certify that the information of as if made under oath; that I am an officer or director es; and that my name appears in Block 10 or Block 11 if

R DIRECTOR