

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000008141

**FILED**  
**Jul 16, 2004**  
**Secretary of State****Entity Name:** RESEARCH AND SERVICE FOUNDATION, INC.**Current Principal Place of Business:**3750 WEST 16TH AVE.  
SUITE 104  
HIALEAH, FL 33012**New Principal Place of Business:****Current Mailing Address:**3750 WEST 16TH AVE.  
SUITE 104  
HIALEAH, FL 33012**New Mailing Address:****FEI Number:** 04-3730573      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MUHLIG, ROLANDO J DR.  
3750 W. 16 AVENUE  
HIALEAH, FL 33012      US**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PD      ( ) Delete  
**Name:** MUHLIG, ROLANDO J DR.  
**Address:** 760 E. 39TH STREET  
**City-St-Zip:** HIALEAH, FL 33013**Title:** SD      ( ) Delete  
**Name:** MUHLIG, LUZ S. GIRALDO  
**Address:** 760 E. 39TH STREET  
**City-St-Zip:** HIALEAH, FL 33013**Title:** VD      ( ) Delete  
**Name:** GARCIA, RAUL DR  
**Address:** 692 EAST 19TH ST.  
**City-St-Zip:** HIALEAH, FL 33013**Title:** D      ( ) Delete  
**Name:** BLUMTRITT, CESAR DR  
**Address:** 1260 S.W. 177TH TERR  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:** TD      ( ) Delete  
**Name:** GONZALEZ, CIRILIO DR  
**Address:** 7804 N.W. 124TH TERRACE  
**City-St-Zip:** HIALEAH GARDENS, FL 33018**Title:** D      ( ) Delete  
**Name:** ACOSTA, JOSE D DR  
**Address:** 2355 S.W. 27TH ST.  
**City-St-Zip:** MIAMI, FL 33133**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PRES      (X) Change ( ) Addition  
**Name:** MUHLIG, ROLANDO J  
**Address:** 760 E. 39TH STREET  
**City-St-Zip:** HIALEAH, FL 33013**Title:** DIR      (X) Change ( ) Addition  
**Name:** MUHLIG, LUZ S. GIRALDO  
**Address:** 760 E. 39TH STREET  
**City-St-Zip:** HIALEAH, FL 33013**Title:** DIR      (X) Change ( ) Addition  
**Name:** GARCIA, RAUL DR  
**Address:** 692 EAST 19TH ST.  
**City-St-Zip:** HIALEAH, FL 33013**Title:** DIR      (X) Change ( ) Addition  
**Name:** BLUMTRITT, CESAR DR  
**Address:** 1260 S.W. 177TH TERR  
**City-St-Zip:** PEMBROKE PINES, FL 33029**Title:**      ( ) Change ( ) Addition  
**Name:**      ( ) Change ( ) Addition  
**Address:**      ( ) Change ( ) Addition  
**City-St-Zip:**      ( ) Change ( ) Addition**Title:** DIR      (X) Change ( ) Addition  
**Name:** ACOSTA, JOSE D DR  
**Address:** 2355 S.W. 27TH ST.  
**City-St-Zip:** MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DR. ROLANDO J. MUHLIG

PRES

07/16/2004

Electronic Signature of Signing Officer or Director

Date