

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007007

FILED  
Jan 29, 2008  
Secretary of State

Entity Name: RMO FOUNDATION INC.

**Current Principal Place of Business:**

3195 NW 67 ST.  
MIAMI, FL 33147 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 472733  
MIAMI, FL 33147 US

**New Mailing Address:**

FEI Number: 42-1670352      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WILDER, ROSHARD D  
7011 N.W. 29 AVENUE  
MIAMI, FL 33147 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: CEO ( ) Delete  
Name: BARNETT, EDWARD D  
Address: 3195 NW 67 ST.  
City-St-Zip: MIAMI, FL 33147 US

Title: COO ( ) Delete  
Name: BUTLER, JACKLYN  
Address: 3255 SW 61 ST.  
City-St-Zip: MIRIMAR, FL 33023 US

Title: CFO ( ) Delete  
Name: PEREZ, SHAWN  
Address: 11201 NW 15TH ST.  
City-St-Zip: PEMBROKE PINES, FL 33026 US

Title: VP ( ) Delete  
Name: PICKETT, JAIME A  
Address: 10960 NW 14TH AVE APT. G36  
City-St-Zip: MIAMI, FL 33167 US

Title: P ( ) Delete  
Name: WILDER, ROSHARD  
Address: 7011 NW 29TH AVE.  
City-St-Zip: MIAMI, FL 33147 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: PICKETT, JAIME A  
Address: 1800 SERVICE ROAD  
City-St-Zip: OPA LOCKA, FL 33054 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: EDWARD BARNETT

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

CEO

01/29/2008

\_\_\_\_\_  
Date