

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

01 SEP -7 PM 3:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00G00052528

1. Entity Name
RMS CONSULTING, INC.

Principal Place of Business
370 SE MIZNER BLVD. #1608
BOCA RATON FL 33432

Mailing Address
370 SE MIZNER BLVD. #1608
BOCA RATON FL 33432

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-1027579

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STANKUS, RITA M
370 S.E. MIZNER BLVD. #1608
BOCA RATON FL 33432

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Delete
NAME D STANKUS, RITA M
STREET ADDRESS 370 SE MIZNER BLVD. #1608
CITY-ST-ZIP BOCA RATON FL 33432

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Supriya Stankus
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/13/01
Date

561.703.5550
Daytime Phone #

CR2E034 (5/01)

2082

Attachment
A0081782

#00000052578

August 13, 2001

Division of Corporations
Uniform Business Report Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Annual Corporation Fee to FL Dept. of State

Dear Sir:

(your first notice)

For some reason, I never received a notice in the mail from your State requesting the \$150.00 payment to keep the corporation active. As attached, enclosed is the check of \$150.00 for this request. Please make sure all correspondence is sent to:

RMS Consulting, Inc.
Rita Stankus
370 SE Mizner Blvd. #1608
Boca Raton, FL 33432

Thank you for your cooperation in this matter.

Sincerely,

Rita Stankus

Rita Stankus