2004 FOR PROFIT CORPORATION

May 03, 2004 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P00000099154** 1. Entity Name RR TECHNOLOGY INVESTMENT, INC. Principal Place of Business Mailing Address P.O.BOX 402824 P.O.BOX 402824 MIAMI BCH, FL 33140 MIAMI BCH, FL 33140 04222004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1060447 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RODRIGUEZ, ANTONIO DO NOT WRITE 2601 BISCAYNE BLVD MIAMI, FL 33137 IN THIS SPACE 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE. Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PD TITLE NAME BAUMANN, ROGER STREET ADDRESS P.O.BOX 402824 (197102148551 11940 204-20151-019 150.00 CITY-ST-ZIP MIAMI BCH, FL 33140 DVPS TITLE MILLER, ROGER NAME STREET ADDRESS 2601 BISCAYNE BLVD MIAMI, FL 33137 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST- ZIP

12. 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 trusted exposured to Execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND PYFED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED