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Address change only 03 JUL -2 AM 11: 17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000078660

1. Entity Name
RPM COMMUNICATIONS, INC.

Principal Place of Business	Mailing Address
~~3910 3RD ST. W.~~	~~3910 3RD ST. W.~~
~~LEHIGH ACRES, FL 33971~~	~~LEHIGH ACRES, FL 33971~~

2. Principal Place of Business	3. Mailing Address
3949 Evans Ave	3949 Evans Ave
Suite, Apt. #, etc. # 205	Suite, Apt. #, etc. # 205
City & State Fort Myers FL	City & State Fort Myers FL
Zip 33901 Country USA	Zip 33901 Country USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 13-4203869 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, DAVID L
~~3910 3RD ST. W.~~
~~LEHIGH ACRES, FL 33971~~
3949 Evans Ave (205)
Fort Myers FL 33901

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE ______________________
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00 After May 1, 2003 $400 will be assessed. Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D ☐ Delete	TITLE	☑ Change ☐ Addition
NAME	JOHNSON, DAVID L	NAME	
STREET ADDRESS	~~3910 3RD ST. W.~~	STREET ADDRESS	3949 Evans Ave # 205
CITY-ST-ZIP	~~LEHIGH ACRES, FL 33971~~	CITY-ST-ZIP	Fort Myers FL 33901
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

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CR2E034 (10/02)

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 trustee empowered 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: David [signature] 6/20/03 941-275-7766
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CARL J. GRECO
Accountant
3949 Evans Avenue #205
Fort Myers, FL. 33901
239-275-7766
Fax 239-275-9150

May 17, 2003

Florida Dept of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL. 32314

REF: RPM Communications, Inc.
P02000078660

Dear Ladies & Gentlemen:

Please accept my client's enclosed check to renew his corporation for year 2003.

He did not receive a UBR for 2003. He moved to a new address, which is:

3949 Evans Av. #205
Fort Myers, FL. 33901

Please accept his check to renew, with his apology for its tardiness. Please send him the necessary form (if any) to renew.

Thank you for your cooperation in this matter.

CARL GRECO

DAVID JOHNSON, as president

CJG;bg
Encl.