

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000000716

Entity Name: RHAI NETWORK, INC.

FILED  
Apr 30, 2009  
Secretary of State

## Current Principal Place of Business:

6699 N. FEDERAL HWY  
202  
BOCA RATON, FL 33487 US

## New Principal Place of Business:

## Current Mailing Address:

581-BC E. SAMPLE RD  
B  
POMPANO BEACH, FL 33064 US

## New Mailing Address:

FEI Number: 45-0495193

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JACQUES, LESLY  
581-BC E. SAMPLE RD  
B  
POMPANO BEACH, FL 33064, US 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: JACQUES, LESLY  
Address: 581 B EAST SAMPLE RD  
City-St-Zip: POMPANO BEACH, FL 33064

Title: CEO ( ) Delete  
Name: DIEUJUSTE, FRITZ  
Address: 9467 BOCA COVE CIRC #U112  
City-St-Zip: BOCA RATON, FL 33428

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRITZ DIEUJUSTE

OFFI

04/30/2009

Electronic Signature of Signing Officer or Director

Date