

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000001504

FILED
Apr 19, 2004
Secretary of State

Entity Name: RELATIONSHIP MANAGEMENT INTERNATIONAL, INC.

Current Principal Place of Business:

1506 GENOA STREET
CORAL GABLES, FL 33134

New Principal Place of Business:

160 WEST CAMINO REAL, PWB 161
BOCA RATON, FL 33432

Current Mailing Address:

1506 GENOA STREET
CORAL GABLES, FL 33134

New Mailing Address:

160 WEST CAMINO REAL, PWB 161
BOCA RATON, FL 33432

FEI Number: 33-1036380

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VERDES, RUBEN L
1506 GENOA STREET
CORAL GABLES, FL 33134

Name and Address of New Registered Agent:

VERDES, RUBEN L D/P
2645 EXECUTIVE PARK DRIVE
SUITE 107
WESTON, FL 33331

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: RUBEN VERDES

04/19/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete
Name: VERDES, RUBEN L
Address: 1506 GENOA STREET
City-St-Zip: CORAL GABLES, FL 33134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: VERDES, RUBEN L
Address: 2645 EXECUTIVE PARK DRIVE, SUITE 107
City-St-Zip: WESTON, FL 33331

Title: M () Change (X) Addition
Name: HESSEMER, KAI EVP
Address: 160 WEST CAMINO REAL, PWB 161
City-St-Zip: BOCA RATON, FL 33432

I hereby certify that the information supplied with this filing does not qualify for the 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 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: RUBEN VERDES

DPST

04/19/2004

Electronic Signature of Signing Officer or Director

Date