

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2004 8:00 am
Secretary of State

02-02-2004 90041 023 ***150.00

DOCUMENT # P03000080457 1. Entity Name RGB PROMOS, CORP.			
Principal Place of Business 2550 SW 18 TERRACE, STE #2311 FORT LAUDERDALE, FL 33315		Mailing Address 2550 SW 18 TERRACE, STE #2311 FORT LAUDERDALE, FL 33315	
2. Principal Place of Business 2160 SW 16th Avenue		3. Mailing Address P.O. BOX 0872	
Suite, Apt. #, etc. 420		Suite, Apt. #, etc. 	
City & State Miami, FL 33145		City & State Miami, FL 33145-0872	
Zip 		Zip 	
Country 		Country 	
4. FEI Number 04-3768018		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GIRASOL, FERNANDO A 2550 SW 18 TERRACE, STE #2311 FORT LAUDERDALE, FL 33315		7. Name and Address of New Registered Agent Name Rodrigo F. Pineiro Street Address (P.O. Box Number is Not Acceptable) 2160 SW 16th Avenue, Ste 420 City Miami FL Zip Code 33145	
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 <small>Signature, typed or printed name of registered agent and title if applicable.</small>		<small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P	NAME GIRSAOL, FERNANDO A	<input checked="" type="checkbox"/> Delete	
STREET ADDRESS 2550 SW 18 TERRACE, STE #2311	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP FORT LAUDERDALE, FL 33315			
TITLE 	NAME 	<input type="checkbox"/> Delete	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 			
TITLE 	NAME Rodrigo F. Pineiro	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 	2160 SW 16th Avenue Miami, FL 33145		
TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
CITY-ST-ZIP 			
TITLE 	NAME 	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS 	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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)(l), 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:		Date 01/22/04	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Daytime Phone #</small>	