

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000058582

Entity Name: RLME, INC.

FILED
Jan 10, 2007
Secretary of State

Current Principal Place of Business:

201 JOHNSON STREET
HOLLYWOOD, FL 33019

New Principal Place of Business:

Current Mailing Address:

3830 N. 39TH AVENUE
HOLLYWOOD, FL 33021

New Mailing Address:

FEI Number: 20-1084472

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROFFE, RALPH
3830 N. 39TH AVENUE
HOLLYWOOD, FL 33021 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: PD () Delete
Name: ROFFE, RALPH
Address: 3830 N. 39TH AVENUE
City-St-Zip: HOLLYWOOD, FL 33021

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: LEVY, SARAH S
Address: 5636 N. PARK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: TRS () Change (X) Addition
Name: BOTTON, JOYCE
Address: 5636 N. PARK ROAD
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: SEC () Change (X) Addition
Name: EMANO, BERNARD
Address: 8761 SW 8TH STREET
City-St-Zip: PLANTATION, FL 33324

I hereby certify that the information supplied with this filing does not qualify for the 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: RALPH ROFFE

PD

01/10/2007

Electronic Signature of Signing Officer or Director

Date