2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2008 8:00 am Secretary of State 05-01-2008 90214 026 ***158.75

					1 .	seureiz	IIV	OI 512	11.0
DOCUMENT # P92000002231 1. Entity Name R GROUP INTERNATIONAL, INC.					05-01-2008 90214 026 ***158.75				
Principal Place of Business Mailing Address]	•			
2321 NW 66TH CT. 2321 NW 66TH CT.									
SUITE W4 SUITE W4									
			3 US			•			
GAINESVILLE, FL 32653 US GAINESVILLE, FL 32653 U			3 03		1 19811681 118	IBNA 1190 B910 BBN1 681			(88) II (88)
2. Principal Place of Business - No P.O. Box #		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04282008	04282008 Chg-P CR2E034 (12/06)				
City & State	e	City & State			4. FEI Numbe	r		Ap	plied For
011) & 012.0		2.0, 2.2			59-3149			⊢	t Applicable
Zip Country		Zip Coun			00 01 10	7011	$\overline{}$		
Country		Zip			5. Certificate	of Status Desired	X O'	\$8.75 Add Fee Required	
					<u> </u>		- 1		
	6. Name and Address of Current	Registered Agent		*	/. Name and	Address of New F	cegistered	Agent	
				Name					•
KAHN, HENRY J				Street Address (B.O. Boy Number is Not Acceptable)					
	BOTH AVENUE		'	Street Address (P.O. Box Number is Not Acceptable)					
GAINESVILLE, FL 32606						· · · · · · · · · · · · · · · · · · ·			
			ļ						
				City		·	F	Zip Code	
<i>i</i> .								-	
8. The above	named entity submits this statement for	or the purpose of changing its r	registered	office or register	red agent, or bot	h, in the State of Fl	orida. I ar	n familiar with,	and accept
the obligat	ions of registered agent.								
SIĢNATURE_				7					
	Signature, typed or printed name of registered agent	t and title if applicable. (NOTE:	: Registered Ap	gent signature required	when reinstating)		DATE		
				1.5					
FIL	E NOW!!! FEE IS \$150.00	9. Election Campaig	-		.00 May Be				
After Ma	ay 1, 2008 Fee will be \$550.	00 Trust Fund Contri	ibution.	L. Add	led to Fees				
	05510500 445	- CHOTOTODO	1		100170104	21111050 TO 05	10500 44	ID DIDECTOR	3 (5) 4 4
10.	OFFICERS AND		11.	 	ADDITIONS	CHANGES TO OFF	ICEHS AN		
TITLE			TITLE					Change	Addition Addition
NAME	KAHN, HENRY J		NAME						
STREET ADDRESS	SS 2321 NORTHWEST 66TH COURT S-W4		STREET	ADDRESS					
CITY+ST-ZIP	GAINESVILLE, FL 32653		CITY-ST	r-ZIP					
TITLE	ST Delete TITL							☐ Change	Addition
NAME	KAHN, NOREEN J	Delete	NAME	l				Onlings	
		DT C MA		*DDDCCC					
STREET ADDRESS	2321 NORTHWEST 66TH COU	KT 5-444		ADDRESS					
CITY-ST-ZIP	GAINESVILLE, FL 32653		CITY-ST	1-217		<u> </u>			
TITLE		Delete	TITLE					Change	Addition
NAME	1		NAME						
STREET ADDRESS	1.		STREET /	ADDRESS					
CITY-ST-ZIP			CITY-ST	r- ZIP		+		· -	÷
			7171.5					Change	☐ Addition
TITLE		☐ Delete	TITLE					Change	☐ Addition
NAME			NAME						
STREET ADDRESS]			ADDRESS					
CITY-ST-ZIP			CITY-ST	T-ZIP	<u></u>	<u> </u>			
TITLE		☐ Delete	TITLE					☐ Change	■ Addition
NAME			NAME					•	_
STREET ADDRESS				ADDRESS					
CITY-ST-ZIP	1		CITY-ST	I					
TITLE	1	☐ Delete	TITLE					Change	☐ Addition
NAME			NAME						
STREET ADDRESS				ADDRESS					
CITY_ST_7IP	I		CITY, CT	r_710					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 7

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/28/08 378-363