FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90146 034 ***150.00

DOCUMENT # P9200003680

1. Corporation Name

R.C.M. INVESTMENTS, INC.

11.0.111	TEO IMENTO, INO.						
Principal Place	e of Business	Mailing Address			\$ 100 tidat ille (8410 tidat Bella casta gant) entra car	80 31110 B 1 101	18111 #811 1881
6781 ROYAL MI MIAMI FL 33015	ELBOURNE DR	6781 ROYAL MELBOURNE DR MAIMI FL 33015	6781 ROYAL MELBOURNE DR MAIMI FL 33015		DO NOT WRITE IN THIS S	PACE	
US		US			3. Date Incorporated or Qualifed	AUL	
	•				11/05/1992		<u>-</u>
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	plied For
21					65-0373344		t Applicable
Suite,-Apt	#; etc.====================================	Suite-Apt.#, etc.			5. Certifcate of Status Desired	*	Additional
22		27				Fee Re	
City & State	e	City & State	_		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Žip	Country	Zip	Country		8. This corporation owes the current year Intar		_
24	25	29 30	<u> </u>		1 croonary roperty rax:	Yes	□No
	9. Name and Address of Curr	rent Registered Agent		· · · · · · · · · · · · · · · · · · ·	10. Name and Address of New Registered A	jent	
000	SPOULTZ DANNEDO		81	Name			
	NRGUEZ, RAMIRO		82 Street Add		Idress (P.O. Box Number is Not Acceptable)		
	ROYAL MELBOURNE DR		<u> </u>	<u> </u>			
MIAN	/II FL 33015		83				
			84	City	FL	85 Zip (Code
11. Pursuant office or r agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	0502 and 607.1508, Florida Statutes, ate of Florida. Such change was autho ligations of, Section 607.0505, Florida	the above orized by Statutes	e-named co the corpora	propration submits this statement for the purpose of clation's board of directors. I hereby accept the appoint	anging its ment as re	registered gistered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (NOTE: Reg	nistered Agen	t signature requ	uired when reinstating) DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1 TITLE	1	2 A	4 Change	Addition
NAME	RODIRGUEZ, RAMIRO		1.2 NAME	r,	n へへのノベノバデサ カカル/RO 兄.		
STREET ADDRESS	821 WEST 39 PLACE	/	1.3 STREET	ADDRESS 4	1781 Royal Melbourne	· OR	
CITY-ST-ZIP	HIALEAH FL		1,4 CITY-S	T-ZIP	UIAMI FL 33015		
TITLE	VTD	DELETE	H			Change	☐ Addition
NAME	RODIRGUEZ, CARMEN		I			E -	,
STREET ADDRESS	821_WEST_39_PLACE		23 STREET ADDRESS		6781. Royal Melbooks	egz	
CITY-ST-ZIP	HIALEAH FL		2.4.CITY ST. 7ID		WIAMI FL 00016		_
TITLE	SD	DELETE	3.1 TITLE		50	Change	☐ Addition
NAME	RODIRGUEZ, MAYELIN		3.2 NAME	ķ	CODRIGUEZ MAYELIN	א מל ע	,
STREET ADDRESS	821 WEST 39 PLACE		3.3 STREET	ADDRESS (DODRIGUEZ MAYELIN 6781 ROYAL NELBOURN	EDI	,
CITY-ST-ZIP	HIALEAH FL		3.4. CITY-S	IT-ZIP	VIDMI FL 33015		
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, on an attachment with an address, with all other like empowered.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS CfTY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

☐ DELETE

DELETE

Change

☐ Change

Addition

Addition