## NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthan

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300003069 (0)

REHMAT, INC.

Principal Place of Business

2031 GRIFFIN RD. DANIA FL 33312 Mailing Address

2931 GRIFFIN RD. DANKA FL 33312-566

## FILED May 20 1997 8:00am Secretary of State



DANIA FL 333	12	DANIA FL	33312-5665								
						3.	Date Incorp 01/08/19	orated or Qualified	3a. Date	of Last R 3/1996	.eport
2. Principal P	lace of Business	<del> </del>	2a. Mailing Address				FEI Number 65-0437			<u> </u>	oplied For of Applicable
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				Certificate of	of Status Desired			Additional
City & Stat	e	City &	City & State				Election Car	mpaign Financing	П		May Be
Zip	Country	<b>28</b>	<del></del> -	Country		B.	This corpora	ation has liability for i	ntangible ta	x under s	
24	25 25 Address	29		30			Florida Stati		Yes 🔀		
CVE	D, BADER R	s of Current Registered A	gent	81	Name	10.	Name and	Address of New Re	dissesed W	jent	
	1 GRIFFIN RD.				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
	NA FL 33312			82	Street	Address (F	O. Box Nun	iber is Not Acceptab	le)		
				83		· · · · · · · · · · · · · · · · · · ·			- <u>-</u> -		
ı				84	City				FL	<b>85</b> Zip (	Code
office or r	egistered agent, or both, i	ins 607.0502 and 607.1508 in the State of Florida. Such the obligations of, Section	h change was	authorized by	the corp	corporation s to	n submits thi poard of dire	s statement for the p ctors. I hereby accep	urpose of o t the appoi	hanging it ntment as	s registered registered
Ordinations		f registered agent and little if applicat	ule (NO	It. Registered Age	nt signature				DATE		
12.	OFF	FICERS AND DIRECTORS	T	13.			ADDITIONS/0	CHANGES TO OFFIC			
TITLE	SYED, BADER R	ORA	☐ DELETE	1.1 TITLE					L	Change	Addition
NAME	2931 GRIFFIN RD.	rim		1.2 NAME							
STREET ADDRESS	DANIA FL 33312			1.3 STREET							
CITY-ST-ZIP	DIWINI C GOOLE		DELETE	1.4 CITY - S 2.1 TITLE	T-ZIP	0.1	<u> </u>	57. 00. 0		Change	Addition
NAME			CJ OFFERIE	2.2 NAME	ر	l Mi	ts rut	9 1 MM 6		Onlinge	And Moniton
STREET ADDRESS				23 STREET	ADDDEEC		570	GIMFION		^	
CITY-ST-ZIP				2 4 C/TY - 2		11- B	045 1	51001 Q GMF1000	o He	<b>á ゝ</b> :	3044
TITLE			DELETE	3.1 TITLE	21 - 211	<i>V</i>	<i>t</i> .	/- 1	, <u> </u>	Change	Addition
NAME				3.2 NAME				*	_	_	
STREET ADDRESS				3.3 STREET	ADDRESS						
CITY-ST-ZIP				3.4. CJTY-5	ST- <b>ZI</b> P						ļ
TITLE			DELETE	4.1 TITLE						Change	Addition
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET	ADDRESS						
CITY-ST-ZIP				4.4 CITY - S	T-ZIP	<b></b>					
TITLE			☐ DELETE	5.1 TITLE					L	Change	Addition
NAME				5.2 NAME							00
STREET ADDRESS				5.3 STREET	ADDRESS						(15)
CITY-ST-ZIP			<b>—</b>	5.4 CITY - S	1-2IP	ļ <u></u>				7 0.	2120191
TITLE			☐ DELETE	6.1 TITLE					L	Change	☐ Addition
NAME				6.2 NAME						L	
STREET ADDRESS				63 STREET	ADDRESS			t	Bled	205	1
CITY-ST-ZIP				64 CITY-S	T-ZIP				Ok 0	45/	62.

I do 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, or on an atlachment with an address.