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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9300007654 (5)

R & M UNITED, INC.

Principal Place of Business

SIGNATURE:

SHAH, F 3580 CH ROUTE : TITUSVII	Country 25  Name and Address of Cu RAJESH R IENEY HIGHWAY 50 LLE FL 32780	28. Mailing Add 26 Suite, Apt. 6 27 City & State 28 Zip 29 strent Registered Agent	#, etc.	Country 30 81		3. Date Incorporated or Qualified 02/01/1993 4. FEI Number 59-3161755 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in Florida Statutes  10. Name and Address of New Rec	F Antangible tax ur Yes No	App Not	ied For Applicable ditional uired lay Be Fees
21   Suite, Apt #, et 22   City & State 23   Zip 24   9.   SHAH, F 3580 CH ROUTE : TITUSVII	Country 25  Name and Address of Cu RAJESH R IENEY HIGHWAY 50 LLE FL 32780	26 Suite, Apt. 6 27 City & State 28 Zip 29	#, etc.	81		4. FEI Number 59-3161755  5. Certificate of Status Desired  6. Election Campaign Financing Trust Fund Contribution  8. This corporation has liability for in Florida Statutes	St. St. Antangible tax ur. Yes No	App Not 75 Addee Req 5.00 M dded to nder s. 1	Applicable iditional uired lay Be Fees
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3580 CH ROUTE TITUSVII	IENEY HIGHWAY 50 LLE FL 32780			82	ı				
ROUTE :	50 LLE FL 32780 e provisions of Sections 607			102	Stroot Add	ress (P.O. Box Number is Not Acceptable	lo)		
TITUSVII	LLE FL 32780				Sliget Add	ress (F.O. box Number is Not Acceptable	ie)		
11. Pursuant to to	e aravisions of Sections 607			B3					
11. Pursuant to the office or regist	e provisions of Sections 607.			84	City		85	Zip Co	
<ol> <li>Pursuant to the office or recest</li> </ol>	e provisions of Sections 607.			İ	l			•	
agent I am ta	mear with, and accept the o	bligations of, Section 60	7.0505, Flor	rida Statute	S.	tion's board of directors. I hereby accep	t the appointme	ent as re	gistered
Signa <b>12.</b>	dure, typed or printed name of registere		(NOTE		ent signature requ	ired when reinstating)	DATE	OTODO	D. 10
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