

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

INCORPORATION  
AND REGISTRATION  
1995



STATE OF FLORIDA  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

APR 19 1995

APR 19 1995

DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000036473 (5)**

**R-S PLUS INVESTMENT CORP.**

1201 HAYS STREET, SUITE 105  
TALLAHASSEE FL 32301

3. Date of Incorporation (Required)	3a. Date of Last Report
<b>05/18/1993</b>	<b>11/01/1994</b>
4. FID Number	Applied Fee
<b>65-0417931</b>	Not Applicable
5. Certificate of Status (Required)	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing / Fund Raising Contribution	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under S. 1991(1)(b), Florida Statutes.	<input type="checkbox"/> Yes <input type="checkbox"/> No

2. Incorporation State	2a. Mailing Address
<b>21 FL</b>	<b>26 FL</b>
22. State of Incorporation	27. Mailing Address
<b>23 FL</b>	<b>28 FL</b>
24. State of Incorporation	29. Mailing Address
<b>25 FL</b>	<b>30 FL</b>

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
<b>PRENTICE HALL CORPORATION SYSTEM, INC.</b> <b>1201 HAYS STREET, SUITE 105</b> <b>TALLAHASSEE FL 32301</b>	81. Name
	82. Street Address (P.O. Box Number is Not Acceptable)
	83. City
	84. State
	<b>FL</b> 85. Zip Code

11. Pursuant to the provisions of Sections 807.04(2) and 807.15(2), Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office of record in the State of Florida. Such change was authorized by the corporation's Board of Directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Sections 807.04(2) Florida Statutes.

SIGNATURE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (If)	
1. NAME	PD	1. NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. STREET ADDRESS	RATEY, JOSEF	2. STREET ADDRESS	Goethestrasse 10a
3. CITY	ALBERT KOEHLER STR. 20	3. CITY	D77654 Offenburg, GERMANY
4. STATE	D-7789 OTTENHOEFEN, GERMANY	4. STATE	
5. NAME	V	5. NAME	
6. STREET ADDRESS	VOLZ, EMIL	6. STREET ADDRESS	
7. CITY	BURGSTRASSE 18	7. CITY	
8. STATE	D-79331 TENINGEN, GERMANY	8. STATE	
9. NAME	ST	9. NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. STREET ADDRESS	SEIDEL, HELGE	10. STREET ADDRESS	
11. CITY	AM ERLNBACH 22	11. CITY	
12. STATE	67468 FRANKENSTEIN, GERMANY	12. STATE	
13. NAME		13. NAME	AS
14. STREET ADDRESS		14. STREET ADDRESS	Elisabeth M. Crosse
15. CITY		15. CITY	2490 South Lima St.
16. STATE		16. STATE	Aurora, CO 80014
17. NAME		17. NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
18. STREET ADDRESS		18. STREET ADDRESS	
19. CITY		19. CITY	
20. STATE		20. STATE	
21. NAME		21. NAME	
22. STREET ADDRESS		22. STREET ADDRESS	
23. CITY		23. CITY	
24. STATE		24. STATE	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and is true and correct, for the incorporation stated in this filing. I further certify that this information is included on the original report or supplemental annual report in this and in each state and that my representative shall have the same legal effect as if this is under oath. If it is not under oath, the liability of the corporation for the inclusion of false or misleading information is transferred to the registrant as required by Chapter 100, Florida Statutes, and that my name appears in Block 13 of this filing. I hereby certify that I am familiar with an address.

SIGNATURE: *[Signature]* X  
 SIGNING OFFICER OR DIRECTOR

24th April 1995 X