

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994.
AMOUNT DUE ON OR BEFORE 8/10/94: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

CORPORATION
ANNUAL REPORT
1994



FLORIDA DEPARTMENT OF STATE
JIM SMITH
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000045099 (7)

1. Corporation Name
RUALB, INC.

Mailing Address
999 WASHINGTON AVE
MIAMI BEACH FL 33139

Principal Place of Business
999 WASHINGTON AVE
MIAMI BEACH FL 33139

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. Mailing Address		2b. Principal Place of Business		4. FIC Number		3a. Date of Last Report	
21		26		65-0420451		06/25/1993	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		6. Election Campaign Financing Trust Fund Contribution	
22		27		\$8.75 Additional Fee Required ☐		☐	
City & State		City & State		7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐		\$5.00 May Be Added to Fees	
23		28		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No			
Zip	Country	Zip	Country				
24	25	29	30				

DO NOT WRITE IN THIS SPACE

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
1. FILINGS, INC. 3732 NW 16TH ST FT LAUDERDALE FL 33311				81 Name Martin W. Wasserman			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83 999 Washington Ave			
				84 City Miami Beach FL 85 Zip Code 33139			

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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, Section 607.0505 or 617.0503, Florida Statutes.

SIGNATURE *Martin W. Wasserman* 6/27/94

12. OFFICERS AND DIRECTORS				13. CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE	D	1.1 TITLE		1.1 TITLE		1.1 TITLE	
1.2 NAME	GALBUT ABRAHAM A	1.2 NAME		1.2 NAME		1.2 NAME	
1.3 STREET ADDRESS	999 WASHINGTON AVE	1.3 STREET ADDRESS		1.3 STREET ADDRESS		1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	MIAMI BEACH FL 33139	1.4 CITY - ST - ZIP		1.4 CITY - ST - ZIP		1.4 CITY - ST - ZIP	
2.1 TITLE	D	2.1 TITLE		2.1 TITLE		2.1 TITLE	
2.2 NAME	GALBUT RUSSELL W	2.2 NAME		2.2 NAME		2.2 NAME	
2.3 STREET ADDRESS	999 WASHINGTON AVE	2.3 STREET ADDRESS		2.3 STREET ADDRESS		2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	MIAMI BEACH FL 33139	2.4 CITY - ST - ZIP		2.4 CITY - ST - ZIP		2.4 CITY - ST - ZIP	
3.1 TITLE		3.1 TITLE		3.1 TITLE		3.1 TITLE	
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5.1 TITLE		5.1 TITLE		5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME		5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS		5.3 STREET ADDRESS		5.3 STREET ADDRESS	
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6.1 TITLE		6.1 TITLE		6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME		6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS		6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and known to be true and correct, 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 its registered agent and have signed this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in the 12 or Check 13 if changed for an amendment will be added.

SIGNATURE: *William A. Galbut* 6/27/94 305-612-3000