FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 10: 15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P93000061911 (2)**

1. Corporation Name
R & M DEVELOPMENT CORP.

Principal Place of Business	Mailing Address
34 W. DILDO DRIVE MIAMI BEACH FL 33139	1521 ALTON ROAD #329 MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: **09/03/1993**
3a. Date of Last Report: **08/24/1994**
4. FEI Number: **65-0447043** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

JASLOW, CRAIG A
9351 FONTAINEBLEAU BLVD
SUITE B-307
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name: MICHAEL KRIEGER
82 Street Address (P.O. Box Number is Not Acceptable): 34 W. DILIDO DRIVE
83
84 City: MIAMI BEACH FL 85 Zip Code: 33139

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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, Florida Statutes.

SIGNATURE [signature]
Signature, typed or printed name of registered agent and title if applicable — NOTE: Registered Agent signature required when reinstating — DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PSTD	1 1 TITLE	PSTD	☒ Change ☐ Addition
NAME	KRIEGER, MICHAEL	1 2 NAME	KRIEGER, MICHAEL	
STREET ADDRESS	1532 WASHINGTON AVE	1 3 STREET ADDRESS	34 W. DILIDO DRIVE	
CITY-ST-ZIP	MIAMI BEACH FL 33139	1 4 CITY-ST-ZIP	MIAMI BEACH, FLORIDA 33139	
TITLE	VD	2 1 TITLE	VD	☒ Change ☐ Addition
NAME	KRIEGER, RICHARD	2 2 NAME	KRIEGER, RICHARD	
STREET ADDRESS	1532 WASHINGTON AVE	2 3 STREET ADDRESS	34 W. DILIDO DRIVE	
CITY-ST-ZIP	MIAMI BEACH FL 33139	2 4 CITY-ST-ZIP	MIAMI BEACH, FLORIDA 33139	
TITLE		3 1 TITLE		☐ Change ☐ Addition
NAME		3 2 NAME		
STREET ADDRESS		3 3 STREET ADDRESS		
CITY-ST-ZIP		3 4 CITY-ST-ZIP		
TITLE		4 1 TITLE		☐ Change ☐ Addition
NAME		4 2 NAME		
STREET ADDRESS		4 3 STREET ADDRESS		
CITY-ST-ZIP		4 4 CITY-ST-ZIP		
TITLE		5 1 TITLE		☐ Change ☐ Addition
NAME		5 2 NAME		
STREET ADDRESS		5 3 STREET ADDRESS		
CITY-ST-ZIP		5 4 CITY-ST-ZIP		
TITLE		6 1 TITLE		☐ Change ☐ Addition
NAME		6 2 NAME		
STREET ADDRESS		6 3 STREET ADDRESS		
CITY-ST-ZIP		6 4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: [signature] RICHARD KRIEGER 5-1-95 305-674-0529
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0147279 CP