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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretar / of State DIVISION OF CORPORATIONS FILED Apr 27, 1999 8:00 am Secretary of State 04-27-1999 90163 012 ***150.00

1999

DOCUMENT # P93000061911

R & M DEVELOPMENT CORP.

Principal Place	e of Business	Mailing Address				
3003 GREENE S	ST	3003 GREENE ST				
HOLLYWOOD FL 33020 HOLLYWOOD FL 33020			DO NOT WRITE IN TH	HU CDACE		
US US				III) SPACE		
				3. Date Incorporated or Qualifed 09/03/1993		
2. Principal I	ace of Business	2a. Mailing Address		4. FEI Number	<u> </u>	liad For
21		26		65-0447043	 	/ pplicable
Suite, Ap:. #, etc.		Suite, Apt. #, etc.		5. Certifcare of Status Desired	\$8.75 A	
22					Fee Rec	`
City & State		City & State		6. Election Campaign Financing	\$5.00	
23		28		Trust Ft nd Contribution	Added to	-ees
Zip	Count y	Zip _	Country	8. This corporation owes the current year		□1.1 -
24	25	29 3	0	Personal Property Tax.		[]No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Register	en Agent	
KDIE	CED MICHAEL		81 Name			
KRIEGER, MICHAEL 3 4 W. DILIDO DRIVE		82 Street	t Address (P.O. Box Number is Not Acceptable)			
MIAMI BEACH EL 33139				3003 GREENE STREE	<u> </u>	
NAMES OF THE PERSON OF THE PER	AL DEMUTIFE 33-139		83			
			84 City	11	85 Zip C	cde
				HOLLYWOOD F	'I- 133	020 1
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above-named	d connection submits this statement for the purpose	of changing its	registered
office or re	egistered agent, or bot i, in the State m familiar with, and accept the obliga	of Florida. Such change was aut ations of, Section 607.0505, Florid	norized by the corp la Statutes.	oora ion's board of directors. I hereby accept the ap		, Kereu
•	=			4-	26-91	}
SIGNATURE	MICHAEL Signature, typed or printed name of registered age	nt and title if applicable (NOTE R	egistered Agent signature	required which removed by		
12.		ID DIRECTORS	13.	ADDITIC NS/CHANGES TO OFFICERS		
TITLE	PSTD	☐ DELETE	1.1 TITLE	PSTD	☑ Change	☐ Addition
NAME	KRIEGER, MICHAEL		1.2 NAME	KRIEGER, MICHAEL		
STREET ADDRESS	34 :W. DILDO DRI VE		1.3 STREET ADDRESS	1		
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 CITY-ST-ZIP	HOWYWOOD FLA 3	302 <u>0 </u>	
TITLE	VD	☐ DELETE	21 TITLE	1 4 4 7 7	L ZC hange	☐ Addition
NAME	KRIEGER, RICHARD		2.2 NAME	KRIEGER, RICHARD 3003 GREENE STREI	~	
STREET ADDRESS	3 4 W: DILDO DRI VE	`	2.3 STREET ADDRESS	* L 1 .		
CITY-ST-ZIP	MIAMI BEACH FL 33139		2. 4 CITY-ST-ZIP	HOLLYWOOD, FLA. 3	3020	
TITLE	ST	☐ DELETE	3 1 TITLE	ST	Change	☐ Addition
NAME	CAMPBELL, JANICE		32 NAME	CAMPBELL, JANICE	_	ļ
STREET ADDRE 3S	34 WEST DILIDO DRIVE		3.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI BEACH Ft 33139		3.4. CITY-ST-ZIP	HOLLYWOOD, FLA ?	3020_	
TITLE		DELETE	41 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRE 3S			4.3 STREET ADDRESS	5		
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE				,		
,		☐ DELETE	5.1 TITLE		☐ Change	☐ Addition
NAME		☐ DELETE			☐ Change	☐ Addition
NAME		☐ DELETE	5.1 TITLE	5	☐ Change	☐ Addition
STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	3	☐ Change	☐ Addition
STREET ADDRE 3S CITY- ST-ZIP			5.1 TITLE 5.2 NAME	3		Addition
STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY- ST-ZIP	5	☐ Change	

14. I 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 of 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 changec, or an attact prent with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

CR2E034 (11/98)