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

... 11 AM 8:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000072676 (8)

1. Corporation Name

RMI MITIGATION SERVICES, INC.

Principal Place of Business	Mailing Address
3113 LAWTON RD THE CARR BLDG #130 ORLANDO FL 32803 US	3113 LAWTON RD THE CARR BLDG #130 ORLANDO FL 32803 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 10/14/1993	3a. Date of Last Report: 04/27/1994
4. FEI Number: 59-3231735	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	

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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BURKE, JOHN C 6251 CHANCELLOR DR SUITE 100 ORLANDO FL 32809-5646	81 Name: 82 Street Address (P.O. Box Number is Not Acceptable): 3113 LAWTON ROAD 83 THE CARR BUILDING SUITE 130 84 City: ORLANDO FL 85 Zip Code: 32803

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1 TITLE	☐ Change ☐ Addition
NAME	NICHOLS RONALD O	1 NAME	
STREET ADDRESS	3100 ZINFANDEL DR #600	1 STREET ADDRESS	
CITY-ST-ZIP	RANCHO CORDOVA CA	1 CITY-ST-ZIP	
TITLE	D	2 TITLE	☐ Change ☐ Addition
NAME	HARVEGO LLOYD H	2 NAME	
STREET ADDRESS	3100 ZONFANDEL DR #600	2 STREET ADDRESS	
CITY-ST-ZIP	RANCHO CORDOVA CA	2 CITY-ST-ZIP	
TITLE	D	3 TITLE	☐ Change ☐ Addition
NAME	GROSSMAN JACK H	3 NAME	
STREET ADDRESS	3100 ZONFANDEL DR #600	3 STREET ADDRESS	
CITY-ST-ZIP	RANCHO CORDOVA CA	3 CITY-ST-ZIP	
TITLE	S	4 TITLE	☐ Change ☐ Addition
NAME	KIMMEL SHIRLEY M	4 NAME	
STREET ADDRESS	3100 ZINFANDEL DR #600	4 STREET ADDRESS	
CITY-ST-ZIP	RANCHO CORDOVA CA	4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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)(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 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: SHIRLEY M. KIMMEL, CORP SECRETARY 4/25/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

916/852-1300

0065300 CP