SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996

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

FILED
Aug 13 1996 8:00 am
Secretary of State

DOCUMENT # **P94000026898 (4)**

1. Corporation Name
R.I.R.P.B., INC.

Principal Place of Business
300 ROYAL PALM BEACH BLVD.
SUITE 302
ROYAL PALM BEACH FL 33411
US

Mailing Address
300 ROYAL PALM BEACH BLVD.
SUITE 302
ROYAL PALM BEACH FL 33411
US

3. Date Incorporated or Qualified: **04/07/1994**
3a. Date of Last Report: **03/07/1995**

2. Principal Place of Business — 21
Suite, Apt. #, etc — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc — 27
City & State — 28
Zip — 29 Country — 30

4. FEI Number: **65-0513725** 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
WEISSMAN, LINDA
300 ROYAL PALM BEACH BLVD.
ROYAL PALM BEACH FL 33411

10. Name and Address of New Registered Agent
81 Name: SCHWARTZ, MURRAY
82 Street Address (P.O. Box Number is Not Acceptable): 6732 Palermo Way
83
84 City: Lakeworth, FL — 85 Zip Code: 33467

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: M Schwartz
Signature (typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required after reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☒ DELETE
NAME	WEISSMAN, LINDA	
STREET ADDRESS	300 ROYAL PALM BCH BLVD	
CITY-ST-ZIP	ROYAL PALM BCH FL 33411	
TITLE	V	☐ DELETE
NAME	SCHWARTZ, JEANETTE	
STREET ADDRESS	6732 PALERMO WAY	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE	S	☒ DELETE
NAME	GLUCKIN, JENNIFER	
STREET ADDRESS	9033 SRTIST PLACE	
CITY-ST-ZIP	LAKE WORTH FL 33467	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	☐ Change ☒ Addition
1.2 NAME	SCHWARTZ, MURRAY	
1.3 STREET ADDRESS	6732 Palermo Way	
1.4 CITY-ST-ZIP	Lake Wrth, Fla. 33467	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	M	☐ Change ☒ Addition
3.2 NAME	Palladino, Tricia	
3.3 STREET ADDRESS	5169 Woodstone Circle East	
3.4 CITY-ST-ZIP	Lake Worth, FL 33463	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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***225.00

CR2E034 (3/96)

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: M Schwartz 7/23/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date