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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

SIGNATURE

P94000040602 (2)

RMT LEASING, INC.						
						T KANDISHAL DIN KANTA ARARIK MALIFFANDI IL KANTA MARIFFANDI BARIK ARARIK ARARIK TIMBI TANDA
Principal Place of Business Mailing Address						
3816 NORTH	3816 NORTHLAKE BLVD % RACHEL THAUBERGER					
8220 S VIRGINIA AVE 8220 S VIRGINIA AVE						
PALM BEACH GARDEN FL 33403 PALM BEACH GARDENS F			NS FL 334	L 33418		DO NOT WRITE IN THIS SPACE
US						3. Date Incorporated or Qualified
2 Principal	Place of Business	1.0 14-10 14-17				05/26/1994
	2a. Mailing Address	Mailing Address			4. FEI Number Applied For	
21 Suite, Apt	Scritto Apt. # etc	uita Ant # eta			65-0491192 Not Applicable	
22	, 11, 0.07	⊢	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22 27 City & State City & State City & State City & City & State City & City & State City &						Fee Required
23	28	Sity di Citato			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Co	untry	,	
24	25	29	30	, c. i.i.,		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre		100			10. Name and Address of New Registered Agent
TI-	IAUBERGER, RACHEL			81	Name	
	220 S VIRGINIA AVE					
PALM BEACH GARDENS FL 33418				82	Street A	Address (P.O. Box Number is Not Acceptable)
,,	LESS DE LOTT ON WIBEITO LE COTTO	,		83		
				84	City	■■ 85 Zip Code
					-	
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 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE						
12.	Signature, typed or printed name of registered ag	ent and little if applicable. (N ID DIRECTORS			nt signature r	e required when reinstating) DATE
TITLE	DPS	DELETE	13.	TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	THAUBERGER, RACHEL					Change Addition
STREET ADDRESS				1.2 NAME 1.3 STREET ADDRESS		
CITY - ST - ZIP	DALLA DELON CADDENIA EL ANTICO				i	
TITLE	DVT	DELETE		CITY-SI FITLE	1-212	Change Addition
NAME	THAUBERGER, LEO			VAME		
STREET ADDRESS	ACCOUNT ALIE				ADDRESS	
CITY-ST-ZIP	BALLA BEACH CAROTHO EL POLAS			CITY-S		· '
TOTLE	11,200 02 10,1 0, 1,100,10 1,11	DELETE		TILE	1-41	☐ Change ☐ Addition
NAME				IAME		_ onange _ Autrion
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				CITY-S'	- 1	
TITLE		DELETE		INLE	1-415	Change Addition
NAME				NAME		Stange Et Addition
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			- 1			
TITLE		☐ DELETE	5.1 T	ITY-ST	- 41F	Change Addition
NAME			5.1 N			La Ostange Laf Addition
STREET ADDRESS					4DODECC	
· ·					ADORESS	
CITY - ST - ZIP TITLE		☐ DELETE	5.4 C	ITY-ST	- 218	☐ Change ☐ Addition
NAME		[] SEELIE	6.2 N			Li Change Li Adunion
STREET ADDRESS					MODECC	
OTHER FROMES			0.33	INCE!	ODRESS	

14. I hereby certify that the information supplied with this filling 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 office 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 editess.