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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000057625 (3)

RTQ MANAGEMENT, INC.

Principal Place of Business
831 PALM TRAIL #5

Mailing Address

FILED Mar 27 1997 8:00am Secretary of State



831 PALM TRA DELRAY BEACK		931 PALM TRAIL #5 DELRAY BEACH FL 33483	931 PALM TRAIL #5 DELRAY BEACH FL 33483-5858					
					3. Date incorporated or Qualified 08/03/1994			
2. Principal Piace of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number		Applied For	
21		26			65-0518278		Not Applicable	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	27		6. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State)	City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Ζιρ 24]	Country 25	Zip 29	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
271	9. Name and Address of C		1901		10. Name and Address of New Reg			
ITO.	YD, W S		81 1	Name				
ON DALLY TOAK AS					ess (P.O. Box Number is Not Acceptab	(A)	· · · · · · · · · · · · · · · · · · ·	
DELRAY BEACH FL 33483					556 (F.O. BOX NUMBER 18 NOT Acceptab			
			83					
			84 (City		FL 85	Zip Code	
11. Pursuant I	to the provisions of Sections 60	7.0502 and 607.1508, Florida Statut	es, the above-n	named corpo	oration submits this statement for the pi		ing its registered	
office or re	egistered agent, or both, in the	State of Florida, Such change was a obligations of Section 607 0505. Etc.	authorized by th	ne corporation	oration submits this statement for the poon's board of directors. I hereby accep	t the appointme	nt as registered	
	Trigonia do Mari, dello doccepi aro	omiganorio di, ocolori dovidodo, i le	oned blatates.				Ì	
SIGNATURE	Stign if one by a disk printed name of registe	red agent and title if applicable (NOT	E Registered Agent a	signature require	ed when reinstating)	DATE	· · · · · · · · · · · · · · · · · · ·	
12.		S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIREC	TORS IN 12	
TIILE	VP .	DELETE	1.1 TITLE			☐ Chi	ange Addition	
NAME	LLOYD, \$		1.2 NAME					
STHEET ADDRESS	931 PALM TRAIL #5	_	1.3 STREET AD	ORESS			į	
CITY -S1 - 767	DELRAY BEACH FL 3348		1.4 CITY-ST-7	ZIP				
1:TLE		DELETE	2 1 TITLE			☐ Ch	ange Addition	
NAME			22 NAME	Į.				
STREET ADDRESS	•		23 STREET ADDRESS					
COY-ST-ZIF	T. STATE		2. 4 CITY - ST - ZIP				1 1 2 2 2 2 2	
TITLE	DELETE		3.1 TITLE			Chi	ange [_] Addition	
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET AD	1				
Cify-St-ZiP Title		DELETE	3.4. GITY-ST- 4.1 TITLE	ZIP		17 ck	ange Addition	
		L Mitt				U	a-iao □ vananinii	
NAME PROLES ABORESE			4 2 NAME	IDDEE6				
STREET ADORESS			4.3 STREET AD	- 1				
CITY - ST - ZIP TITLE		DELETE	4.4 CITY-ST-2 5.1 TITLE	tir [☐ Ch	ange Addition	
NAME		hand obtained	5.2 NAME	.				
STREET ADDRESS			5.3 STREET AD	ODRESS				
CITY-ST-ZIP			5.4 CITY-ST-2					
TITLE		DELETE	61 TITLE	L''		Ch	ange Addition	
NAME		· ·	62 NAME	-				
STREET ADDRESS			63 STREET AD	DRESS				
CITY-ST-ZIP			6 4 City-St-2	· [
	by certify that the information su	ipplied with this filing does not quali			in Section 119.07(3)(i), Florida Statutes	s. 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: