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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Såndra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1998 DOCUMENT # P9400065897 (8)

FILED Feb 12 1998 8:00am Secretary of State

1. Corporation	RY TECHNOLOGY, INC.	0065897 (8)			1 4 3 4 1 4 4 1 4 4 1 4 1 4 1 4 1 4 1 4	141 <b>84</b> 11 <b>0 8</b> 12 <b>22 4</b> 0101 10(8) 5	<b>Sent en e</b> l e <b>s</b> el
Principal Place	of Business	Mailing Address			L IDDIIDAL IID IBIN BIBN BOIII BOIII D	in edile dilat šlibi ilina i	#1(1 F##4 J##1
8233 NW 66 ST 25 SE 2ND AVE.							
MAIMI FL 33166 MIAMI FL 33166 US US					DO NOT WRITE	IN THIS SPACE	
00		03			3. Date Incorporated or Qualified		
					09/08/1994		
	ace of Business	2a. Mailing Address			4. FEI Number		pplied For
	NW 68 St				65-0522200		ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Regulred	
City & State		City & State		6. Election Campaign Financing		May Be	
23 Miam	; FL	28 Miami	FL		Trust Fund Contribution		to Fees
Zip	Country	Ζψ	Country		8. This corporation owes or has pa		
24 3316		29 33166	30 US	<u>H</u>	Personal Property Tax due June		No
	g, Name and Address of Currer	nt Registered Agent	81 1	Name	10. Name and Address of New Re	gistered Agent	
SANTUS, MAURU C ESU							
	SE SECOND AVE IRAHAM BLDG, SUITE 1235		62	Street Addre	ss (P.O. Box Number is Not Acceptat	ole)	
	MI FL 33131		83				
mun	um 1 C 55 15 1		ļ <u>.</u>	A		100 2	O. d.
				City			Code
11. Pursuant t	o the provisions of Sections 607.050	2 and 607.1508, Florida Statu	tes, the above-r	named corpo	ration submits this statement for the pon's board of directors. I hereby acce	ourpose of changing	ts registered
agent. I ar	n familiar with, and accept the oblig	alions of, Section 607.0505, F	lorida Statutes.	ie corporatio	or s poard or directors. Friereby acce	рине арронипениа	a registered
SIGNATURE .							
12.	Signature, typed or printed name of registrated ago OFFICERS AN		It: Registered Agent of	signature required	ADDITIONS/CHANGES TO OFFIC	DATE CERS AND DIRECTO	RS IN 12
TITLE	DP	DELETE	1.1 TITLE	T	ADDITIONS/OFFA NALES TO OFFICE	Change	Addition
NAME	MENDES, JOSE		1.2 NAME				
STREET ADDRESS	RUA CAIUBI, 324, APT 32		1.3 STREET AD	DRESS			
City-St-Zip	SAO PAULO SP 05010-000		1.4 CITY- ST-2	ZIP			
TITLE	DVP\$	[] DELETE	2.1 TITLE			☐ Change	Addition
NAME	FILHO, ALBERTO SENTIE		2.2 NAME				
STREET ADDRESS	RUA GUILHERMINA, 291		2.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	SAO PAULO SP 02469-040 DT	DELETE	2 4 CITY - ST - ZIP 3 1 TITLE			Change	Addition
NAME	MATTOS, ROBERTO	battie	31 TITLE 32 NAME			ELI CHENGO	
STREET ADDRESS	RUA MINERVA, 94		3 3 STREET AD	IDRESS			
CITY-ST-ZIP	SAO PAULO SP 05007-030		3.4. CITY - ST -				
TITLE		DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME	ľ			
STREET ADDRESS			4.3 STREET AD	DRESS			
CITY-ST-ZIP			4.4 CITY-ST-2	ZIP			
TITLE		☐ DELETE	5.1 TITLE			L. Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET AD	ł			
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP			☐ Change	Addition
NAME			6.1 TITLE 6.2 NAME			C orange	Addition
STREET ADDRESS			6.3 STREET AD	DRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP				
14 Lhereby c	ertify that the information supplied w	ith this filing does not qualify	or the exemptio	n stated in S	ection 119.07(3)(i), Florida Statutes. I	further certify that th	e information
officer or o	on this annual report or supplementa director of the corporation or the recor or Block 13 if changed, or on an alla	eiver or trustee empowered to	curate and that i execute this rep	my signature port as requi	s shall have the same legal effect as i red by Chapter 607, Florida Statutes;	and that my name a	ppears in