

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P94000079681 (0)**

1. Corporation Name

RVM CHARTER CORPORATION



Principal Place of Business

**757 S.E. 17TH ST.
SUITE 429
FORT LAUDERDALE FL 33316**

Mailing Address

**XXXXXXX
XXXXXXX
FORT LAUDERDALE FL 33316
XXXXXXXXXXXXXXXXXXXX**

3. Date Incorporated or Qualified

10/27/1994

3a. Date of Last Report

08/09/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country
25 Country
26 **Matthews Ventures**
27 Suite, Apt. #, etc.
28 **59 Elm Street**
29 City & State
30 **New Haven, CT 06510**
31 Zip
32 **06510**
33 Country
34 **USA**

4. FEI Number

65-0531841

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

10. Name and Address of New Registered Agent

**MAASS, ROBB R
321 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480**

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

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 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

Signature typed or printed name of registered agent and their appointer

(If Not Registered Agent Signature required when reconstituting)

Date

12. OFFICERS AND DIRECTORS

☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
MATTHEWS, ROBERT V
11847 PEBBLEWOOD DRIVE, #802
WEST PALM BEACH FL 33414**
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VTAS
FOURNIER, STEVEN A
65 BANK STREET
WATERBURY CT 06702**
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**S
DONNARUMMA, FRANCIS
65 BANK STREET
WATERBURY CT 06702**
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**AS
MAASS, ROBB R
321 ROYAL POINCIANA PLAZA
PALM BEACH FL 33480**
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition
1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
5. TITLE
6. NAME
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93. TITLE
94. NAME
95. STREET ADDRESS
96. CITY - ST - ZIP
97. TITLE
98. NAME
99. STREET ADDRESS
100. CITY - ST - ZIP
**000001829440
-05/20/96--01048--015
***208.75**

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)(k), 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:

Francis M. Donnarumma, Secretary

4/28/96

**(203) 562-1000
SG-5-1-96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Filing #

CR2E034 (12/95)