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

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000079988 (9)

RPM WORLDWIDE, INC.

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

FILED Jul 15 1998 8:00am Secretary of State

☐ Change

Addition

Principal Place of Business Mailing Address					1 00111 30016 10116 10161 10103 1811 1031
210-A 2980 STREET 210-A 2980 STREET				ļ	
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139				DO NOT WRITE	IN THIS SPACE
S NOTE NEW CORPORATE OFFICE ADDRESS 2				3. Date Incorporated or Qualified	THIS OF NO.
Y EF	PACTIVE - 6.15.98)	1 /2	11/01/1994	
	tace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1960			est ave.	65-0536865	Not Applicable
Suite, Apt GUIT	#, etc. E 202	Suite, Apt. #, etc. 27 GVITE 20	2	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28 MIAMI BE	ACH, FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33	Country USA	29 33134	Country 30 U.S.A.	This corporation owes or has pair Personal Property Tax due June	— · — ·
				10. Name and Address of New Registered Agent	
WE	IGEL, KYLE L ESO		81 Name		
100 SE 2ND STREET - SUITE 1700			82 Street Ad	Street Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33131			83		•
•			84 City	••	FI 85 Zip Code
office or n agent. La SIGNATURE	egistered agent, or both, in the State on familiar with, and accept the obligation.	of Florida. Such change was au tions of, Section 607.0505, Flor	uthorized by the corpor- rida Statutes.	rporation submits this statement for the pu ation's board of directors. I hereby accep	t the appointment as registered
<u></u>	Signature, typed or printed name of registered agen-		Registered Agent signature req		DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	Change Addition
NAME	MOONEY, FRANCIA K	[] octest	12 NAME	MOONEY, FRANCIA K.	* 707_
STREET ADDRESS	210-A 23RD STREET		1.3 STREET ADDRESS	1860-4 MEST WAY	2:08
CITY - ST - ZIP	MANU DELOUI EL COACO		1.4 CITY - ST - ZIP	MOONEY, FRANCIA K. Change Addition 1860-A WEST AVE, STE 202 MIAMI BEACH, FL 33139	
TITLE		☐ DELFTE	2 1 TiTLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	3.1 TITLE		Change Addition
NAME (3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		C Swee	4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 tristee 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 a address.

DELETE