## 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 19, 2004 8:00 am Secretary of State DOCUMENT # P95000066366 03-19-2004 90038 039 \*\*\*150 00 RURAL INTERNATIONAL, INC. Principal Place of Business Mailing Address 54019562 200 S BISCAYNE BLVD. 200 S BISCAYNE BLVD. 3550 3550 MIAMI, FL 33131 MIAMI, FL 33131 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03102004 CR2E034 (10/03) Cha-P Applied For City & State City & State 4. FEI Number 65-0603095 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MACAULAY, ROBERT B Street Address (P.O. Box Number is Not Acceptable) ONE SE 3RD AVE. 2200 SUNTRUST INTL CENTER MIAMI, FL 33131 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Change ☐ Addition TITLE ☐ Delete TITLE TOLEDO, FERNANDO NAME NAME 200 S BISCAYNE BLVD 3550 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition RABELLO, SABINO C NAME NAME STREET ADDRESS 200 S BISCAYNE BLVD 3550 STREET ADDRESS MIAMI, FL 33131 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change Addition NAME RABELLO, KATIA NAME 200 S BISCAYNE BLVD 3550 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP ☐ Delete □ Change ☐ Addition BINDER, LUISA NAME NAME 200 S. BISCAYNE BLVD.#3750 3550 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33131 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE □ Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental report is to 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment withy an address with all other like empowered.

Fernando Toledo/President

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

(305)372-3308

Daytime Phone #

03/10/04