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

• PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

FILED May 15 1997 8:00am Secretary of State

	1001				ly of State
DOCUMENT # P950000 70634					-
1. Corporation Name					
DOCUMENT # P950000 70634 1. Corporation Name RHA Associates, Inc.					
	,				
Principal Plac	e al Business	Mailing Address			
C/c Andrew Astrove 6702 South Grande Drive Boca Rotton, FL 33433					
έ.	702 South Gr	ande Drive	•		
- I	Roma Ration El	33433		3. Date Incorporated or Qualified 3	a. Date of Last Report
-	x ca parton, i e			Sept. 13, 1995	
2. Principa Place of Business		2a. Ma ling Address		4. FEI Number	Applied For
21		26		65-0660055	Not Applicable
Suite, Apt. #, etc.		Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		C) Collinate S, Clark Collins	Fee Required
City & Stati	é	City & State		6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country	Trust Fund Contribution	
2 ₁ p	25	29 30	¬ ·	8. This corporation has liability for inter	~ —
24	9. Name and Address of Current		<u> </u>	10. Name and Address of New Regist	
			81 Name <	Steven Sorle	
			B2 Chant Add		
			Street Add	ress (P.O. Box Number is Not/Acceptable)	M. NW
_	·		00	ite BAS	
					er Zin Code
			1 150	oca Katon	FL 55 55 57 51
11. Pursuant	to the provisions of Sections 607 0502	and 607:1508, Florida Statutes,	the above named cor	poration submits this statement for the purp talion's board of directors. I hereby accept the	ose of changing its registered
ofk®e or r agent 1 a	registered agent, at both, in the State of hir familiar with and accept the obligati	if Flotida, Such change was aut lons of, Section 607,0505, Florid	horized by the corpora da Statutes.	ation's board of directors. I nereby accept tr	e appoiniment as registered
SIGNATURE					*
\$1010101L			Registereo Agent signature requ		DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12 Change Addition
TALE	PD		1.1 TITLE		Change Addition
NAMI	Robert Kaufman C/o 2101 Corporate I Suite 325/PacaR	לווש מונו	1.2 NAME 1.3 STREET ADDRESS		;
STREET LANGUESIS	100 2101 COT 101916	alan 17 32421			
CHY-SE ZIE T-TEE	Sitte 303/ IZERN	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET AODRESS		
011 Y - S1 - 201			2. 4 CITY-ST-ZIP		
Dist		DELETE	3 1 TITLE +		Change Addition
NAM!			3.2 NAME		
STREET ACTION SS			3.3 STREET ADDRESS		
Cd7+81-769			3 4. CITY - ST - ZIP		
* 1 :		DELETE	41 TiTLE		Change Addition
NAMA	İ		4 2 NAME		
STREET ATTRIBLES			4 3 STREET ADDRESS		_
CMY+51 ZE			4.4 CITY - ST - ZIP		
111,1	1	L_] DELETE	51 TITLE	1/p	Change
M*Vt			5.2 NAME	V .	%
STREET ACCIDENCE			5.3 STREET ADDRESS	` (٧.
CIT ST 70		T per eye	5.4 City - ST - ZIP		LCbange
Till		☐ DELETE	6 1 TITLE	500002193 -05/28/9701062 ***165.00	3335 Libange Lil Addition
MAME			6 2 NAME	-05/28/9701062	028
SHOT ACCES ()			6 3 STREET ADDRESS	***165.00	
(dv 8 3P	The currie that the information supplied	with this filmo does not quality:	6 4 City-St-ZIP		
informati	on endicated be this annual report or Su	ipplemental annual report is true	e and accurate and the	ed in Section 119.07(3)(i), Florida Statutes. I at my signature shall have the same legal e out as required by Chapter 607, Florida Stat	fect as if made under oath; that

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR