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CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600000673 (9)

RFD INTERNATIONAL CORPORATION

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|---------------------------------------|--|
| Principal Place of Business | Mailing Address |
| 500 N.E. 191 STREET MIAMI FL 33179 | 500 N.E. 191 STREET MIAMI FL 33179-3914 |
| | |

FILED May 08 1997 8:00am Secretary of State



| Principal Place of Business Mailing Address | | | | | | | | |
|---|---|--|---|--|---|---------------------------|---------------------|-----------------------------------|
| 500 N.E. 191 6 MIAMI FL 3317 | | 500 N.E. 191 STREET MIAMI FL 33179-3914 | 500 N.E. 191 STREET | | | | | |
| musan (E 401) | • | William I F and I A A A I A | | | | | | |
| | | | | | Date Incorporated or Qualified 01/02/1996 | 3a. Da | ate of Las | t Report |
| | Place of Business | 2a. Mailing Address | | | 4. FEI Number 65-06 | 350 | \sim | Applied For |
| 1 Cuito Ant | # 010 | 26 Cuito Ant III etc | | | 43-00 | 332 | | Not Applicabl |
| -, ⊦, | | 27 Suite, Apr. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired See Reguli | | | |
| City & State | 0 | City & State | | 6. Election Campaign Financing \$5.00 May Be | | | | |
| 3] | | 28 | · | | Trust Fund Contribution | | | ed to Feos |
| Zip | Country | Zip | Countr | У | 8. This corporation has liability for | | | r s. 199,032, |
| 4 | 25 25 Name and Address of Curre | 129] nt Registered Agent | 30 | | Florida Statutes 10. Name and Address of New F | Yes [| | |
| COF | RPORATION SERVICE COMPAN | | 81 | Name | IV. Name and Addison of flow (| ogisterde / | - goin | |
| | 1 HAYS STREET | • | | Ciscol Ada | Page (D.O. Day Aliyeth as in May Access | | | |
| | LAHASSEE FL 32301-2525 | | 82 | Street Add | dress (P.O. Box Number is Not Accepta | 10(6) | | |
| | | | 83 | 1 | · <u></u> | ···· | | |
| | | | 84 | City | | | 85 Z | ip Code |
| | | | | 1 - 1 | | FL | | • |
| office or r | to the provisions of Sections 607.050 registered agent, or both, in the State of familiar with, and accept the oblider. | 02 and 607.1508, Florida Statut o of Horida. Such change was a nations of Section 607.0505. Ek | es, the abov authorized b orida Statute | /e-named cor by the corpora es | poration submits this statement for the ation's board of directors. I hereby acc | purpose of ept the app | changin ointment | g its registered as registered |
| SIGNATURE | | | | | | | | |
| 12, | Signature, typed or printed name of registered ag OFFICERS AN | ent and tale if applicable (NOT ID DIRECTORS | I: Registered Ag | jent signature requ | ired when reinstating) ADDITIONS/CHANGES TO OFF | DATE ICEDS AND | NIDECT | OPS IN 12 |
| ITLE | D | DELETE | 1.1 THLE | | ADDITIONS/CHANGES TO OFF | ICENS MINE | Chang | |
| NAME | SHAW, KENNETH P | _ | 1.2 NAME | | | | | |
| STREET ADDRESS | % 500 N.E. 191 STREET | | 1.3 STREE | T ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL 33179 | | 1.4 CHY- | S1 - 7IP | | | | |
| TITLE | D | DELETE | 2.1 TO LE | | | • | Chang | je 🔲 Additio |
| NAME | SHAW, DAN | | 2.2 NAMi | | | | | |
| STREET ADDRESS | % 500 N.E. 191 STREET MIAMI FL 33179 | | | 1 ADDRESS | | | | |
| CITY-ST-ZIP TITLE | D | DELETE | 2. 4 CITY - 3.1 TITLE | ST-ZIP | | | Chang | e Additio |
| NAME | SHAW, JACQUELYN | | 3.2 NAME | | | | | |
| STREET ADDRESS | % 500 N.E. 191 STREET | | | 1 ADDRESS | | | | |
| CITY-ST-ZIP | MIAMI FL 33179 | | 3.4. CITY | - S1 - 7IP | | | | |
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| NAME | | | 4. 2 NAME | \ | | | | |
| STREET ADDRESS | | | - 6 | 1 ADDRESS | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 4.4 CITY - 5.1 TILLE | S1 - 7/P | | | Chanc | ne Additio |
| NAME | | [] DEFFIE | 5.2 NAME | | | | LL UIKIK | io FTT VOORIO |
| STREET ADDRESS | | | 1 | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 City | | | | | |
| TITLE | | DELEY | 6.1 TITLE | | | | Chang | e Additio |
| NAME | | // | 62 NAME | 1 | | | | |
| STREET ADDRESS | | . 1/ | 6.3 STREE | I ADDRESS | | | | |
| CITY-ST-ZIP | | $I \longrightarrow V$ | 6.4 CJ Y - | 1-ZIP | | | | |
| 14. I do heret | by certify that the information supply | what this fling does not quali | fy for the ex | Emption state | nd in Section 119.07(3)(i), Florida Statu | tes. I further | certify th | nat the |
| I am an o | by certify that the hiormation supply on indicated on this annual report of officer or director of the corporation in Block 12 or Block 13 if changes, c | the receiver or trustee empov | vorce to exe | cute this repo | at my signature shall have the same lea yt as required by Chapter 607, Florida | Statutes; a | nd that m | onger oath, th ly hame |
| appears i | In Block 12 of Block 13 if changed, o | or on arrectachment with an add | drors | / | <i>'</i> | | | |
| SIGNAT | URE:/// | 11 | 4-0 | シン | | | | |
| A1A11111 | - NOW AND THE OF AND THE OP | PROUTE SAME OF BURNING OFFICE | oh processon | | Factor | | | |