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FILED
Jun 17 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000007714 (4)

1. Corporation Name

RRP INVESTMENT GROUP, INC.



Principal Place of Business

850 SEVILLA AVE.
#201
CORAL GABLES FL 33134

Mailing Address

350 SEVILLA AVE.
#201
CORAL GABLES FL 33134-6617

3. Date Incorporated or Qualified
01/22/1996

3a. Date of Last Report

2. Principal Place of Business
21 782 N.W. Lejeune Rd.

2a. Mailing Address
26 782 N.W. Lejeune Rd.

4. FEI Number
65-0636339

Applied For
Not Applicable

22 Suite 428

27 Suite 428

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Miami, Fla.

28 Miami, Fla.

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 33126 25 U.S.A.

29 33126 30 U.S.A.

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

ARANGO ELENA
350 SEVILLA AVE.
#201
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name

NOEL R. PUIG

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

782 N.W. Lejeune Rd.

83

Suite 428

84 City

Miami

FL

85 Zip Code
33126

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

Noel R. Puig
Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PS
NAME ARANGO, ELENA ☒ DELETE
STREET ADDRESS 350 SEVILLA AVE. #201
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PS
1.2 NAME NOEL R. PUIG ☒ Change ☐ Addition
1.3 STREET ADDRESS 782 N.W. Lejeune Rd. #428
1.4 CITY-ST-ZIP Miami, Florida 33126

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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: *Noel R. Puig*

NOEL R. PUIG, PRESIDENT

4-28-97 (305) 442-8093

CR2E034 (9/96)