2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P96000045327

FILED Feb 25, 2005 8:00 am Secretary of State

02-25-2005 90156 014 ***150.00

RESEAR		SE MANAGEME	ENT, IN	C.							
Principal Plac	e of Business	·	Ma	iling Address							
			34	3431 SW 107 AVE				,	500	19275	
MIAMI, FL 33165-3632			М	MIAMI, FL 33165-3632							
2. Principal Place of Business 3.			3. 1	3. Mailing Address							
Suite, Apt. #, etc.			5	Suite, Apt. #, etc.							
						02032005	Chg-P	CR2E	034 (10/03)		
City & State		(City & State			4. FEI Number				oplied For	
Zip	I	Country	7		Coun	irv	65-0671			\$8.75 Ad	ot Applicable
			_	T		,	5. Certificate of	of Status Desired		Fee Require	
	6. Name	and Address of Curn	ent Regist	ered Agent		NI	7. Name and	Address of New R	egistered	Agent	
POMARES	S RAFAFI					Name					
3431 SW 1	107 AVE					Street Addres	s (P.O. Box Numbe	r is Not Acceptable)		
MIAMI, FL	33165-36	32									
						City		········		Zip Coc	
									F	<u>- 1 </u>	
	i named entity lions of registi	y submits this statemer ered agent.	nt for the p	urpose of changing its	registeri	ea office or regis	itered agent, or both	n, in the State of Fid	orida. Lan	n familiar with,	and accept
CICNIATURE											
SIGNATURE	Signature, typed	or printed name of registered a	gent and title i	applicable. (NOT	E: Registere	d Agent signature requ	rired when reinstating)		DATE		
FiL After Ma	E NOWIII ay 1, 2005	FEE IS \$150.00 5 Fee will be \$55	50.00	9. Election Campa Trust Fund Conf		ncing \$	55.00 May Be added to Fees				
10.		OFFICERS A	ND DIREC	TORS	11.		ADDITIONS/0	CHANGES TO OFF	ICERS AN		
TITLE NAME											
	D			☐ Delete	TITL					☐ Change	☐ Addition
	POMARES	S, RAFAEL		☐ Detete	NAM	E				Change	Addition
STREET ADDRESS CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL		☐ Defete	NAM Strig		· · · · · · · · · · · · · · · · · · ·			☐ Change	L_] Addition
STREET ADDRESS	POMARES 3431 SW	S, RAFAEL 107 AVE		☐ Delete ☐ Delete	NAM Strig	EET ADDRESS -SI-ZIP				☐ Change	Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	POMARES 3431 SW	S, RAFAEL 107 AVE			NAM STRE CITY TITLI NAM	EET ADDRESS -ST-ZIP E					
STREET ADDRESS CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE			STRE CITY TITL NAM STRE	EET ADDRESS -SI-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	POMARES 3431 SW	S, RAFAEL 107 AVE		☐ Dekete	STRE CITY TITL NAM STRE	EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP					
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	POMARES 3431 SW	S, RAFAEL 107 AVE			NAM STRE CITY TITL NAM STRE CITY	EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP E				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	POMARES 3431 SW	S, RAFAEL 107 AVE		☐ Dekete	NAMM STRE CITY TITL NAMM STRE CITY TITL - NAMM STRE	EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP EET ADDRESS -SI-ZIP EET ADDRESS				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE	_	☐ Delete	NAM STRE CITY TITL NAM STRE CITY TITLI - NAM STRE CITY	EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	POMARES 3431 SW	S, RAFAEL 107 AVE	_	☐ Dekete	NAMM STRE CITY TITL NAMM STRE CITY TITL - NAMM STRE	EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EE				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE	-	☐ Delete	NAM STREE CITY TITL NAM STRECTIY TITL	EET ADDRESS -SI-ZIP E EET ADDRESS				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE	-	Delete	NAM STRE CITY TITLI NAM STRE CITY TITLI - NAM STRE CITY TITLI NAM STRE CITY TITLI NAM STRE CITY	EET ADDRESS -SI-ZIP E SEET ADDRESS -SI-ZIP				Change	Addition Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	POMARES 3431 SW	S, RAFAEL 107 AVE	_	☐ Delete	NAM STRE CITY TITLI NAM STRE CITY TITLI - NAM STRE CITY NAM STRE CITY ITILI NAM STRE CITY ITILI NAM STRE CITY	EET ADDRESS -S1-ZIP EET ADDRESS -S3-ZIP EET ADDRESS -S3-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE	_	Delete	NAM STRE CITY TITLI NAM STRE CITY TITLI CITY TITLI NAM STRE CITY TITLI NAM STRE CITY NAM	EET ADDRESS -S1-ZIP EET ADDRESS -S3-ZIP EET ADDRESS -S3-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS -S1-ZIP EET ADDRESS				Change	Addition Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	POMARES 3431 SW	S, RAFAEL 107 AVE		Delete	NAM STRE CITY TITLI NAM STRE CITY TITLI CITY TITLI NAM STRE CITY	EET ADDRESS -S1-ZIP E SEET ADDRESS -S3-ZIP E SEET ADDRESS -S3-ZIP E SEET ADDRESS -S1-ZIP E SEET ADDRESS -S1-ZIP E SEET ADDRESS -S1-ZIP E SEET ADDRESS				Change	Addition Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	POMARES 3431 SW	S, RAFAEL 107 AVE	-	Delete	NAM STRE CITY TITLI NAM TITLI	EET ADDRESS -S1-ZIP EET ADDRESS				Change	Addition Addition Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	POMARES 3431 SW	S, RAFAEL 107 AVE		Delete Delete Delete	NAM STRE CITY TITLI NAM STRE CITY NA	EET ADDRESS -S1-ZIP EET ADDRESS				Change Change Change	Addition Addition Addition

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 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 of trubes employered to see the port as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with a statutes.

SIGNATURE: _

ND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #