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FILED
Apr 02 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 # P96000064718 (5)

1. Corporation Name

RESOURCE SERVICES & SUPPLY, INC.



Principal Place of Business

20253 N.E. 15 COURT
NORTH MIAMI BEACH FL 33179

Mailing Address

20253 N.E. 15 COURT
NORTH MIAMI BEACH FL 33179-2710

2. Principal Place of Business

21 1500 NW 62 ST

Suite, Apt. #, etc.

22 112

City & State

23 Ft. Lauderdale

Zip

24 33309

Country

25 USA

2a. Mailing Address

26 1500 NW 62 ST

Suite, Apt. #, etc.

27 112

City & State

28 Ft. Lauderdale

Zip

29 33309

Country

30 USA

3. Date Incorporated or Qualified

08/02/1996

3a. Date of Last Report

4. FEI Number

05-0683835

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

LEOPOLD, NORMAN
SUITE 501
20801 BISCAYNE BOULEVARD
AVENTURA FL 33180

81 Name

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

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent and filed applicant

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME SHALEV, LIOR
STREET ADDRESS 19000 N.E. 20 COURT
CITY-ST-ZIP NORTH MIAMI BEACH FL 33179

☐ DELETE

TITLE D
NAME WEINSTEIN, JEROLD R
STREET ADDRESS 9050 N.W. 49 PLACE
CITY-ST-ZIP CORAL SPRINGS FL 33067

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

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)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplementary 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

LIOR SHALEV

1/2/197

954-7727221

CR2E034 (9/96)