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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000069953 (3)

R P M PRO SHOP, INCORPORATED

FILED Feb 06 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address							
7603 NW 50TH ST. 7603 NW 50TH ST. MIAMI FL 33129 MIAMI FL 33166-470							
					3. Date Incorporated or Qualified 08/22/1996	3a. Date of Last	Report
2. Principal F	Flace of Business	2a. Mailing Address			4. FEI Number		Applied For
1		26			65-06953	19	Vot Applicable
Suite, Apt.	. #, €tc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional Required
City & State		City & State	 		Election Campaign Financing Trust Fund Contribution		
Zip	Country	Zip	Count	ry	8. This corporation has liability for		s. 199.032,
4 33	166 25	29	30			Yes No	
	9. Name and Address of Cur	rrent Registered Agent	8	4 41	10. Name and Address of New F	legistered Agent	
SANCHEZ, YVETTE Y				1 Name			
7603 NW 50TH ST.			8	2 Street Add	ress (P.O. Box Number is Not Accept	able)	
MIA	VMI FL 33129		ë				
			8	3			
			6	4 City		FL 85 Zig	o Code
44 D	Fig. the examplement freeting ACT	0000 and 007 1000 Places Asset	100 the of -	10 2000 5 5 5 5 5	occation submitte this statement for the		ita saninana- d
office or	registered agent, or both, in the S	tate of Florida Such change was	ies, ine abo authoriz a d l	by the corpora	poration submits this statement for the tion's board of directors. I hereby acc	ept the appointment a	is registered is registered
agent La		_	orida 8741ut	es.		1.100	,
SIGNATURE	Signature, typed or purebout une of registeres	d agent and title if applicable (NO)		gent signature p qui	red when reinstating)	11301911	
12.		AND DIRECTORS	13.	gent signature urqui	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO)RS IN 12
TITLE	Prof 6 ide 13th	DELETE	1.1 TITLE		7.001110110,0111111020 10 011	Change	******
NAME	President Lorenzo Beoga 8635 N.W. 8th s	MO Tr.	1.2 NAM				
STREET ADORESS	20125 41 11 24	J #411	- 1	ET ADDRESS			
CITY-S1-ZIP	Minus El. 33	1/2/2	1.4 CITY	Ţ.			
TITLE	Miani, FL 32 Vice - Preside	DELETE	2.1 TITLE			Change	Addition
NAME	Daviel Sutter		2.2 NAM			•	
STREET ADDRESS		1th Dlane		ET ADDRESS	•		
City - St - ZiP			2. 4 CiTy	*	, ι	•	
TITLE	MIAMI, FL 3	DELETE	3.1 TITLE			Change	Addition
NAME	suretary	0	3.2 NAM	E		_	
STREET ADDRESS	Rafael T. Go	nzalez	3.3 STRE	ET ADDRESS			
CITY-ST-ZIP	3/5, W. 20+h	35010 # 108		-ST-2IP			
TITLE	rianton, FE	DELETE	4 1 TITLE			☐ Change	Addition
NAME	,		4 2 NAN	1E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
STREET ADDRESS				ET ADDRESS - ST - ZIP			
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City-St-ZiP		DELETE	4.4 CITY	-ST-ZIP		☐ Change	Addition
CHY-ST-ZIP TITLE NAME		☐ DELETE	4.4 CITY 5.1 TITLE 5.2 NAM	-ST-ZIP		Change	ı 🔲 Addition
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CHY-S1-ZiP TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME	NI /	,	4.4 C/TY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 C/TY 6.1 TITLE 6.2 NAM	- ST- ZIP E E ET ADDRESS - ST- ZIP E			
CHY-S1-ZIP TITLE NAME SIREET ADDRESS CHT-S1-ZIP TITLE	NI /	,	4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TITLE 6.2 NAM 6.3 STRE	- ST- ZIP E E ET ADDRESS - ST- ZIP E			

by the suppremental annual report is true and accurate and that my signature shall have the same legal effect as if made under or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name god, or on an attachment with an address. information indicated on this Lam an officer or director 4' appears in Block 12 or Block

SIGNATURE:

Daytine Phone #