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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000087104 (1)

R.M.D. GROUP, INC.

FILED Sep 12 1997 8:00am Secretary of State



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1971 BOKYC	ace of Business		ng Address	litt coo						
MIAMI FL 331	ELL AVE. SUITE 920 131		BRICKELL AVE. SU FL 33131-3224	JIL 820						
							3. Date Incorporated or Qualified 10/21/1996	3a. Date of L	ast Repo	ort
2. Principal	Place of Business	2a. N	lailing Address		 -		4. FEI Number	<u> </u>	Applie	ed For
21		26	· · · · · · · · · · · · · · · · · · ·				65.0711701	65.0711701 Not Applica		
Suite, Ap		27 S	uite, Apl. #, etc.				5. Certificate of Status Desired		75 Add ee Requi	
City & St.	ato	28 C	ily & State				Election Campaign Financing Trust Fund Contribution		.00 Ma	
Zip	Country	7.	ip	Cou	untry	,	8. This corporation has liability for in	itangible tax un	der s. 19	9.032,
24	25	29		30	· · · · · ·			Yes No		
	9. Name and Address of Curr	rent Register	ed Agent		0.1		10. Name and Address of New Reg	istered Agent		
	BRA, RICHARD B				81	Name				
	01 SHERIDAN ST, SUITE 208				82	Street Addr	ess (P.O. Box Number is Not Acceptabl	e)		
HO	OLLYWOOD FL 33021				83					
					03					
					84	City	1	FL 85	Zip Coc	de
11. Pursuar	at to the provisions of Sections 607.0	502 and 607	1508, Florida Stat	tutes the a	hove	e-named corn	oration submits this statement for the pu		ing its re	nistoror
office or	r registered agent, or both, in the Sta	ate of Florida.	Such change wa	s authorize	d by	the corporati	oration submits this statement for the point's board of directors. I hereby accept	the appointme	nt as reg	istered
SIGNATURE	<u> </u>									****
12,	Signature, typed or pointed name of ingisterior OFFICERS A	AND DIRECTO		JOTE: Registere	d Age	nt signature require	ed when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE RS AND DIREC	TORSII	N 12
TITLE	President Treas		DELETE	1.1 1	ITLE	<u>-</u>	ADDITIONO/OTIVINGED TO OTITION	☐ Chi		Additio
NAME	Robert Diene			1.2 N						
STREET ADORESS	1221 TARICKELL		#920			ADDRESS				
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4. 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 arrival 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.

MICHATURE, MARALLA DARGON TON ROOD DARGOING 9/1000 (200) 306 1222