NAME

STREET ADORESS

CITY-ST-ZIP

FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 Jun 22 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPO**RATION Sandra &. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # P97000052108 (2) R.G. PUBLISHING, CORP. Principal Place of Business Mailing Address 8567 CORAL WAY 8567 CORAL WAY #176 DO NOT WRITE IN THIS SPACE MIAMI FL 33155 **MIAMI FL 33155** 3. Date Incorporated or Qualified 06/11/1997 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0769286 Not Applicable 21 26 Suite, Apt #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 29 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **GUTIERREZ, RUXANDRA** 8567 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) #176 83 **MIAMI FL 33155** 84 City **B**5 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 Stgnature, typed or pouled name of registers of agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE 1.1 TITLE **GUTIERREZ, RUXANDRA** 1.2 NAME NAME 8567 CORAL WAY STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33155** 1.4 CITY-S1-ZIP CITY-ST-ZIP DELETE 2.1 1/ILE Change Addition TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 3.1 TITLE TOTLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 44 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TOTLE 5.1 TITLE NAME 5 2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

> 6.2 NAME 6.3 STRELT ADDRESS

6.4 CITY - S1 - ZIP

14. 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 annual report or suppliemental 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 To-payer 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 in an appear of the original statutes. 4-29-98 (305)208-2884

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