


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # P98000032751
 1. Entity Name
RS INTERNATIONAL DISTRIBUTORS INC.



Principal Place of Business Mailing Address
8150 SW 8 ST., # 109 **8150 SW 8 ST., # 109**
MIAMI, FL 33144-4264 **MIAMI, FL 33144-4264**

DO NOT WRITE IN THIS SPACE



01152004 No Chg-P CR2E034 (10/03)

4. FEI Number Applied For
65-0837216 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
RIVERON, ROBERTO
1101 SW 128 TERRACE
302
HOLLYWOOD, FL 33027

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE: PD
 NAME: RIVERON, ROBERTO
 STREET ADDRESS: 1101 SW 128 TERRACE, #302
 CITY-ST-ZIP: PEMBROKE PINES, FL 33027

TITLE: STD
 NAME: RIVERON, LETICIA
 STREET ADDRESS: 1101 SW 128 TERRACE, #302
 CITY-ST-ZIP: PEMBROKE PINES, FL 33027

TITLE: _____
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: _____
 NAME: _____
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TITLE: _____
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

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 03/19/04-80021-013 150.00

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 or trustee empowered to execute this report 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 an address, with all other like empowered.

SIGNATURE: Roberto Riveron **ROBERTO RIVERON** 3/21/04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #