FILED

2002 UNIFORM BUSINESS REPORT (UBR

SIGNATURE:

DOCUMENT # P98000034447 REAL TIME RESOURCE MANAGEMENT, INC.						Jan 23, 2002 8:00 am Secretary of State 01-23-2002 90068 019 ***150.00			
1215 N FLAG	ce of Business LER DR RDALE FL 33304		Mailing Address 1215 N FLAGLER DR FORT LAUDERDALE FL 33304 US						
	Place of Business NW STA #, etc.	AVE	3. Mailing Address 901 NW Suite, Apt. #, etc.	701 NW STH AVE		DO NOT WRITE IN THIS SPACE			
	UDERDA			RDALE,	FL	4. FEI Number 65-0827117	No	pplied For ot Applicable	-
333 1	Cour	SA	333 II	USA.		5. Certificate of Status Desired	\$8.75 Add Fee Require		
8. The above	named entity submi	ts this statement for . Field, arms of registered agenta		City S registered office o	Pregister	d agent, or both-in the State of Florida.	L Zip Cod 3330		
	requirement and electria on back)	ots to do so. OFFICERS AND I	Make Check Payal				Added	May Be d to Fees	
TITLE NAME, TABLE STREET ADDRESS CITY-ST-ZIP	P FIELD, JACK 1215 N FLAGLEF FORT LAUDERD/	R DR	Delete	12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	FIEI 901 FOR	ADDITIONS/CHANGES TO OFFICERS AID JACK M. NW STH. AVE. T LAUDERDAYE, FL	Change	Addition	DE024 (0/04)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP		March Sargers with	Change	Addition	1
TITLE NAME Street Address City-St-Zip		<i>^</i>	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		-	Change	☐ Addition	
13. I hereby of indicated of the correctanged,	certify that the information this report or supporation or the receiver or on an attachment	ation supplied with a plemental report is er or trustee empor with an address, w	his filing does not qualify fo rue and accurate and that r ve ed to execute this report in all other like of npowered	r the exemption star ny signature shall h as required by Cha	ted in Sect lave the sa apter 607,	tion 119.07(3)(i), Florida Statutes. I further c ame legal effect as if made under oath; that Florida Statules; and that my name appears	ertify that the in I am an officer s in Block 11 or	nformation or director Block 12 if	

FOR SIGNING OFFICER OR DIRECTOR DATE DATE DAYS PHONE 4