FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P98000037062**1. Corporation Name

R.P.M. INTERNATIONAL, INC.

Principal Place of Business 9350 S DIXIE HWY PH 2 MIAMI FL 33156

Mailing Address

9350 S DIXIE HWY PH 2 MIAMI FL 33156

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90212 012 ***150.00



1411/1311 / 2 00/0	~				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifect 04/23/1998			
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number		V App	olied For
21 .		26						Not	Applicable
Suite, Apt.	#, etc.	Suite, /	Apt. #, etc			5. Certificate of Status Desired		\$8.75 _. ∧	
22		27				J. Common T. Sizino Domina		Fee Rec	uired
City & Stat	te	City &	State			6. Election Campaign Financing	П	\$5.00	
23		28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip		Country	1	8. This corporation owes the cur	rent year In		l
24	25	29	<u></u>	30		Personal Property Tax.	D. 1.4		□No
	9. Name and Address of Currer	t Registered A	gent	81	Name	10. Name and Address of New	Registerea	Agent	
ROUSSO, MARK E				0'	Name				
	O S DIXIE HWY PH 2		82 Street A			ddress (P.O. Box Number is Not Acceptable)			
	MI FL 33156								
INITAL	mi 1 E 30 100			83					
				84	City		FL	85 Zip C	ode
					<u> </u>			<u> </u>	-anistarad
office or r	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obligations.	of Florida, Such	change was aut	thorized by	the corporati	on's board of directors. I hereby acce	pt the appo	intment as reg	istered
SIGNATURE			war. n			ed when reinstating)	DATE		
12.	Signature, typed or printed name of registered age	TO DIRECTORS	```	13.	nt signature require	ADDITIONS/CHANGES TO O		ND DIRECTOR	RS IN 12
TITLE	PVST	D DIRECTORS	☐ DELETE	1.1 TITLE		7,001110107,011111020110		Change	Addition
NAME	SHATOKHIN, SERGEY A			1.2 NAME				- •	_
	AGEN C DIVIE LINEY DU A				TADORESS	•			
STREET ADDRESS	MIAMI FL 33156			1.4 CITY-S					ł
CITY-ST-ZIP	D		☐ DELETE	2.1 TITLE	11-ZIF	·	-	□ Change	Addition
NAME	SHATOKHIN, SERGEY A		□ •••	2.2 NAME		•			_
	GOEG C DIVIE LIMAY DU G				T ADDRESS			_	
STREET ADDRESS	MIAMI FL 33156			~ I	í		, <u>.</u>		* {
CITY-ST-ZIP	MIMMI I E 33130		DELETE	2.4 CITY- 3.1 TITLE	51-ZIP		·	[] Change	Addition
TITLE			C prize	3.2 NAME					
NAME	}								}
STREET ADDRESS	<u> </u>				T ADDRESS		•		{
CITY-ST-ZIP			DELETE	3.4. CITY-:	ST- ZIP			Change	Addition
TITLE			□ pereir						
NAME				4. 2 NAME					
STREET ADDRESS	1 .				T ADDRESS				
CITY-ST-ZIP			☐ DELETE	4.4 CITY-8 5.1 TITLE	ii-ziP			Change	Addition
TITLE)		- Sereic	5.1 IIILE 5.2 NAME				L. Ondrigo	(J: 30001)
NAME				•	T ADDRESS				}
STREET ADDRESS	1			5.4 CITY-8					
CITY-ST-ZiP			T DELETE	6.1 TITLE	11-214	· · · · · · · · · · · · · · · · · · ·		[] Change	Addition
TITLE	1		☐ DELETE	li .		•		[1] cusude	L.J AGGIUGH
NAME				6.2 NAME					
STREET ADDRESS	·				T ADDRESS				
CITY-ST-ZIP	4			6.4 CITY-5	T-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 supplemental 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 receiver or truetee 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, with all other like empowered.

SIGNATURE: