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

Jun 17, 1999 8:00 am Secretary of State

06-17-1999 90009 013 ***150.00

DOCUI 1. Corporation	MENT# $P98000$	059288									
R	ALIMEL INO			_							- -
Principal Place of Business 1203 SW 8 St 1203 SW 8 St 1203 SW 8 St Might FL 33135 Might FL 33135						3. Date Inco	orporate	d or Qual	lifed	HIS SPACE	
2. Principal Place of Business 2a. Mailing Address 2b. 2c. 2c. 2c. 3c. Mailing Address 2c. Principal Place of Business 2c. Mailing Address 2c. 2c. 3c. Mailing Address 2c. 3c. Mailing Address 2c. 2c. 3c. Mailing Address 2c. Mailing Address 2c. Mailing Address 2c. 2c. 3c. Mailing Address 2c. Mailing Address 2c. 2c. 3c. Mailing Address 2c. 3c. Mailing Add				,		4. FEI Num 63 5. Certifcate	ber O		897	\$8.75	pplied For lot Applicable Additional tequired
City & Stat	City & State City & State 28 H. An. Fu					6. Election Campaign Financing Trust Fund Contribution			\$5.00 May Be Added to Fees		
Zip 24	Country 25 9. Name and Address of Current I	Zip 29 33/7/ 30 Registered Agent	Coun	try USA		8. This corp Personal	Propert	у Тах.		Yes	₩
LINA NOGUES 12035W 85+ 41AM, FL 33135				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 2450 SW 137 Bve Su: 72 > 15 83 84 City M. An. FL 85 Zip Code 33,17							
11. Pursuant office or reagent. I a	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligatio	Florida. Such change was authons of, Seption 607.0505, Florida	Statut	ove-named oby the corpores.	oration's	board of dire	this state	ement for hereby a	ccept the at	e of changing it ppointment as r	egistered
12.	OFFICERS AND		13.		<u></u>	7:	IS/CHAI	NGES TO	OFFICERS	AND DIRECT	ORS IN 12
TITLE NAME	PUPST. DELETE 1.17 LING NOOVES . 121		1.1 TITL 1.2 NAM	NAME		so sw				Change	
STREET ADDRESS CITY-ST-ZIP TITLE	1203 SW 8 St Mign, FC 33135	□ OELETE		EET ADDRESS '-ST-ZIP	141	50 SW	137 FL_	pve 33,1 j	J 1178	Change	Addition
NAME STREET ADORESS		_ Vettit	2.2 NAM 2.3 STR	IE EET ADDRESS							
CITY-ST-ZIP TITLE NAME	<u> </u>	☐ DELETE	3.1 TITL 3.2 NAM	- 1						Change	Addition

6.4 CITY-ST-ZIP CITY-ST-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 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, on an attachment with an address, with all other like empowered

3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5 3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

☐ DELETE

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SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

TITLE

NAME

TITLE

NAME

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-219-9050

☐ Change

Change

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Addition

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6/10/99

577324-90009-13 P98000059288

Dept. of State

Re: RALIMEL, Inc. Corp. Report.

as I mentioned to you on the phone last Week Please accept my applygies for filing. This report late. The reason is that when I opened this corporation, the Building was in construction, (which still is) all mail sent to the address was returned back to Sender, that is Why I did not receive the Corp report, until I caused you for change of address. Please understand that this is the first time this has happened. Please thank you for waiving any penalties. Thank you -Sina Nogres (President) Baumel, Inc.