

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

6/29/

FILED
Jul 16, 2004 8:00 am
Secretary of State

06-29-2004 90001 019 ***150.00
07-16-2004 90006 036 ***400.00

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1. Entity Name
RF ENTERPRISES USA INC.



Principal Place of Business

700 E DANIA BCH BLVD
202
DANIA, FL 33004 US

Mailing Address

700 E DANIA BCH BLVD
202
DANIA, FL 33004 US

54062615



01142004 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0855533

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

VIVIES, PATRICK
700 E DANIA BCH BLVD
SUITE 202
DANIA, FL 33004

**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

Signature, typed or printed name of registered agent and title if applicable.

(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
NAME
STREET ADDRESS
CITY- ST- ZIP
PSD
FINN, RANDALL
13 MONTGOMERY ST
BINGHAMTON, NY 13901

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
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CITY- ST- ZIP

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TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

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IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/20/04

Date

607-725337

Daytime Phone *