

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000078624

1. Corporation Name
RBA SERVICES, INC

Principal Place of Business
11816 NW 13 ST
PEMBROKE PINES FL 33026

Mailing Address
11816 NW 13 ST
PEMBROKE PINES FL 33026

FILED
May 03, 1999 8:00 am
Secretary of State

05-03-1999 90104 016 ***150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5317 S.W. 103 Ave Suite, Apt. #, etc.		2a. Mailing Address 26 5317 SW 103 Ave Suite, Apt. #, etc.		3. Date Incorporated or Qualified 09/08/1998	
22 City & State 23 Cooper City, FL Country		27 City & State 28 Cooper City, FL Country		4. FEI Number 65-0860551 Applied For Not Applicable	
24 33328 25 U.S.A.		29 33328 30 U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes the current year Intangible Personal Property Tax. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent BORONAT, RAYMOND 11816 NW 13 ST PEMBROKE PINES FL 33026		10. Name and Address of New Registered Agent 81 Name BORONAT, RAYMOND 82 Street Address (P.O. Box Number is Not Acceptable) 5317 SW 103 Ave 83 84 City Cooper City FL 85 Zip Code 33328	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Raymond Boronat* DATE 4/20/99
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	RAYMOND BORONAT
STREET ADDRESS		1.3 STREET ADDRESS	5317 SW 103 Ave
CITY-ST-ZIP		1.4 CITY-ST-ZIP	Cooper City, FL 33328
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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)(l), 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, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Raymond Boronat* DATE 4/20/99 (954) 252-0743
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)