200	B UNIFORM BUS	INESS REP	ORT (U	BR)					
OCUMENT # P99 0000 38935					FILED				
Entity Name Rima International Inc									
Rima International Inc					03 JUN -5 PM 1:06				
incipal Place of Business Mailing Address					T,	SECRETY EY (ALLAHASSEE	JE STATE	•	
anıı	1 Matheson Ave 204				TANKE.	rLORID,	4		
BONITA Springs FL 34135					nc	200020 /09/03010	168E	722	n ma
Principal	Place of Business	3. Mailing Address			, , ,	994 99 0 TO	101 TUU.) ***1	iO. CIO
Suite. Ap	r. #. etc.	Suite, Apt. #. etc.			DO NOT WRITE IN THIS SPACE				
City & Sta	nte	# 204 City & State			4. FE! Number Applied For				
		BONITA SPRINGS FL			5	59-3584	<u> 562</u>		Not Applicable
Zip	Country	34135	Country	-N	5. Certificate	e of Status Desired		\$8.75 A	
	6. Name and Address of Current		Name		7. Name and	d Address of New	Registered	Agent	
	Khimain, Shafe	Street	Address (F	O. Box Numb	er is Not Acceptab	le)	· · · · · · · · · · · · · · · · · · ·		
Khimani, Shafeeq 27111 Matheson Ave #204				Street Address (P.O. Box Number is Not Acceptable)					
	Bonita Springs	- City					7:n Co.		
			City				<u> </u>	Zip Co	
NATURE	e named entity of mits this statement for	·	E: Registered Agent sign			· · · · · · · · · · · · · · · · · · ·		5/28	/03.
	pration is eligible to satisfy its Intangible	FILE NOW!	II FEE IS \$150	.00		ection Campaign Fi			00 May Be
-	equirement and elects to do so.	After MAY 1: 20 Make Check Payab	le to Departme	CHARLES OF THE STREET, SHE WAS A STREET, SHE		st Fund Contributio	·	Adde	d to Fees
PST	OFFICERS AND E	DIRECTORS Delete	12.	PST		CHANGES TO OFF	FICERS AND	DIRECTOR Change	S IN 11
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policated on this report or supplemental legort 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 direction of the receiver or trustee ampowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 11 or Block 12 if the supplemental with all other like empowered. 3NATURE: X MIGNATURE AND TYPED OR PARTITED NAME OF SIGNING OFFICER OF DIRECTOR

Dote

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Daytinie Phone #

RIMA INTERNATIONAL, INC 27111 MATHESON AVE APT #204 BONITA SPRINGS, FL 34135

May 29, 2003

Secretary of State Division of Corporation P.O.Box 6327 Tallahassee Fl 32314

Ref:-

Document #P99000038935 EIN:-59-3584562 Waiver of penalty

Dear Sir/Madam,

With reference to above, I undersigned SHAFEEQ KHIMANI, President of RIMA INTERNATIONAL, INC. would like to request you to waive the penalty for non-payment of Annual Filing Fees for 2003 on the following grounds.

I never received the Annual Filing Form for 2003, as we changed our mailing address from the old address, and/or may be lost in the mail and/or delivered back to you, which was not forwarded to us. Unfortunatley, I never realized that I did not pay the annual filing fee for 2003 as I did not received the Filing Form for the year 2003. I made a mistake due to lack of knowledge and information & unavoidable circmustances. I would like to request you to waive the penalty on the basis of lack of knowledge, information and misunderstandings.

I am enclosing herewith the check of \$150.00 being an annual filing fee for 2003 as an exceptional case. I assure you that this is not going to happen in the future, if I will receive the Form on or before due date. Please waive the penalty on the basis of lack of knowledge, information, misunderstanding and undue hardship in this bad economy. Thanking you in advance for your cooperation. Sorry for the inconvenience that caused to you. Sincepely,

(SHAFEEQ KHIMANI)

encl:- as above Ck of \$150