

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 19, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000073931

1. Entity Name
RJR GROUP, INC.



Principal Place of Business
9700 SOUTH DIXIE HIGHWAY
SUITE 500
MIAMI, FL 33156

Mailing Address
9700 SOUTH DIXIE HIGHWAY
SUITE 500
MIAMI, FL 33156



02152007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0944125

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

ROBERT, BERNEY
9700 S DIXIE HWY
STE 500
MIAMI, FL 33156

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	BERNEY, ROBERT J
STREET ADDRESS	9700 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	VD
NAME	DUBOFF, JAY B
STREET ADDRESS	9700 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	SD
NAME	WILSON, RUTH B
STREET ADDRESS	9700 SOUTH DIXIE HIGHWAY
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	TD
NAME	BOGDANOFF, RICHARD M
STREET ADDRESS	9700 SOUTH DIXIE HIGHWAY STE 500
CITY-ST-ZIP	MIAMI, FL 33156
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U000000639034
02/28/07-80010-002 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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

Date

Daytime Phone #

2/15/07 305 670-3008