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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

1. Corporation Name

SIGNATURE:

(1)

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Principal Place of Business Mailing Address 1100 N.W. 53RD STREET 1100 N.W. 53RD STREET FT. LAUDERDALE FL 33309 FT. LAUDERDALE FL 33309 3a. Date of Last Report 3. Date incorporated or Qualified 12/21/1990 04/07/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0231461 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 Florida Statutes 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 **BURLEY, DEAN** Street Address (P.O. Box Number is Not Acceptable) 82 1100 N.W. 53RD STREET 83 FT. LAUDERDALE FL 33309 84 City 85 Zio Code 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typical or probation one of registered a past a state it also was the He Hagadeese Agent squat by respo OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. TITLE PD [] DELETE Change 1 1 T-TLE Addition **BURLEY, DEAN** NAME 1.2 KAMF 1100 N.W. 53RD STREET STREET ADDIRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-Z-P 1.4 CITY - ST - ZIE ["] DELETE TITLE 2 1 THE ☐ Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZP 2.4 CITY - \$1 - ZIP TITLE DELFTE 3 1 TITLE Change Add-tron NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CETY - \$T - ZIP 3.4 CITY - ST - ZIP DELETE TITLE Change 4 1 Till LE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CHTY - ST. ZIF ☐ DELETE TITLE 5 1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY STIZE 54 CHY ST ZIP DELETE TIFLE 6 1 TILLE Change Addition NAME 6.2 NAME STREET ADDRESS. 6.3 STREET ADDRESS City-St-Zi2 14. I do hereby certify that the information supplied with this filing is vokinitarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this arment report or suppliemental annual eport 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 this foce-vol or trusted employees to execute his report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if ghanged, or on an attachment with an address.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

BURLEY

CR2E034 (12/95)