**FILED** SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). Jul 09 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # V00603 (3)RK TECHNOLOGIES, INC. Mailing Address Principal Place of Business POST OFFICE BOX 561591 MIAMI EL 33258 1990 NORTHWEST 95 AVENUE MIAMI FL 33172 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/17/1991 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0298255 PO BOX 162800 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 MLAM Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No Zip Country Country US 24 25 29 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent KUMPIS, PETER P 81 9500 SW 97TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33176** City 84 85 Zip 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE Change Addition DELETE KUMPIS, RICHARD 1.2 NAME NAME 9500 SW 97TH ST STREET ADDRESS 13 STREET ADDRESS miami fl CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE Change Addition KUMPIS, PETER NAME 2.2 NAME 9500 SW 97TH ST STREET ADDRESS 2.3 STREET ADDRESS MIÀMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE Change L Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF 500002587655 TITLE 5 1 TITLE DELETE Addition NAME 5.2 NAME -07/14/98--01017--002 STREET ADDRESS 5.3 STREET ADDRESS \*\*\*400.00 CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Addition 500002587**6**5 -07/14/98--01017--001 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS \*\*\*150.00 6.4 CITY-ST-ZIP 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)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplimental 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 of 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 manged, or on a attachment with an address.

SIGNATURE:

6-20-78

(3-5)59(-47(7)