FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

City & State

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Zip



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V	1475
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Country

(4)

City & State

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R.G.R. MANAGEMENT, INC.

Principal Place of Business Mailing Address 3225 NE 16TH ST. 3225 NE 16TH ST. POMPANO BEACH FL 33082-3303 POMPANO BEACH FL 33062 3. Date Incorporated or Qualified 3a. Date of Last Report 02/17/1992 04/10/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0310609 21 26 Suite Ant #, ets Suite, Apt. #, etc. 5. Certificate of Status Desired 22 27

Yes X No 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RUSSELL, GINETTE 3225 NE 16TH ST. 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33062 83 City Zip Code

Country

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. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Stunders, type-lips printed name of repair sect about and little if applicable	(NOTE BE	gristered Agent signature	e required when reinstering) DATE	
12.	OFFICERS AND DIRECTORS	more in	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II	N 12
Ti"lf	D	DELETE	1.1 TITLE	☐ Change ☐	Addition
NAME	RUSSELL, GINETTE		1.2 NAME		
STREET ADDRESS	3225 NE 16TH ST.		1.3 STREET ADORESS		i i
CITY - S1 - ZIP	POMPANO BEACH FL		14 CITY-ST-ZIP		
DULF	D	DELETE.	21 TITLE	Change L	Addition
NAME	RUSSELL, RICHARD		2.2 NAME		ļ
STREET ADDRESS	3225 NE 16TH ST.		2.3 STREET ADDRESS		
City-SI-Zii:	POMPANO BEACH FL		2.4 CITY-S1-ZIP		
TI7LE		DELETE	3.1 TITLE	Change	Addition
NAMÉ			3.2 NAME		-
STREET ADDRESS			3.3 STREET ADDRESS		
City - \$1 - ZiP			3.4. CITY-ST-ZIP		<u> </u>
Hite		DELETE	4.1 TITLE	Change [Addition
NAME			4 2 NAME		ļ
STREET ADDRESS			4.3 STREET ADDRESS		
CITY ST ZIF			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE	Change [Addition
NAME			5.2 NAME		ļ
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST ZIP			5.4 CITY - ST-ZIP		
TITLE		DELETE	6.1 TITLE	☐ Change	Addition
NAME			6.2 NAME		ļ
STREET ADORESS			63 STREET ADDRESS		
CITY ST ZIF			6.4 CITY-ST-ZIP	stated in Section 119 07/3Vi) Florida Statutes I further certify that the	

r do mereuy 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GIMETTE

RUSSELL 3/18/17 954-785-2869

6. Election Campaign Financing

8. This corporation has liability for intangible tax under s. 199.032,

Trust Fund Contribution

FILED

Apr 04 1997 8:00am

Secretary of State

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable