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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V14751

(4)

R.G.R. MANAGEMENT, INC.

FILED Mar 30 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address				LANK BIRDIY BIRDIN SIRUK BIRDIK BIRDIN 1881
3225 NE 16TH ST. 3225 NE 16TH ST.						
POMPANO BEACH FL 33062 POMPANO BEACH FL			L 33062			
					DO NOT WRITE IN T	HIS SPACE
					3. Date Incorporated or Qualified 02/17/1992	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21 26					65-0310609	Not Applicable
Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional
27						Fee Required
⊢		City & State	State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country Zip		Count	ru -	Trust Fund Contribution	Added to Fees
24	25	29	30		 This corporation owes or has paid the Personal Property Tax due June 30. 	Yes No
24	g. Name and Address of Curre		1301		10. Name and Address of New Register	
F	RUSSELL, GINETTE		8	1 Name		
3225 NE 16TH ST.						
POMPANO BEACH FL 33062			8	2 Street Addi	ress (P.O. Box Number is Not Acceptable)	
•	OM AND BEAUTIFE GOODE		8	3		
				<u> </u>		
			8	4 City	1	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508. Florida Stati	utes, the abo	ve-named corr	poration submits this statement for the purpo	se of changing its registered
office or	registered agent, or both, in the State	o of Florida. Such change was	authorized	by the corporal	tion's board of directors. I hereby accept the	appointment as registered
_	in raminar with, and accept the oblig	jations or, section 607.0505, r	nong Statut	68.		
SIGNATURE	Signature, typed or printed name of registered ag	gent and life if applicable. (NO	OTE Registered A	gent signature requi	red when reinstating) DA	ATE
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITU			Change Addition
NAME	Russell, ginette		1,2 NAM	£		Į.
STREET ADDRESS			1,3 STRE	et address		li li
CITY-ST-ZIP	POMPANO BEACH FL			- ST - ZIP		
TITLE	D	☐ DELETE	2.1 TITLE			Change Addition
NAME			2.2 NAM	E		
STREET ADDRESS	3225 NE 16TH ST.		2.3 STRE	ET ADDRESS	, E	. i
City-St-ZiP			2 4 CITY	-ST-ZIP	-	
TATLE		☐ DELETE	3 1 TITLE			Change Addition
NAME			3.2 NAM	E J		ļ
STREET ADDRESS			3.3 STAE	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY	-ST-ZIP		
TITLE		DELETE	4.1 TITLE	ľ		☐ Change ☐ Addition
NAME			4, 2 NAN	IE		
STREET ADDRESS			4.3 STRE	ET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME			5 2 NAM	E		
STREET ADDRESS			5.9 STRE	ET ADDRESS		
CITY-ST-ZIP			5.4 CITY			
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAM	E		İ
STREET ADDRESS			6.3 STRE	ET ADDRESS		İ
CITY-ST-ZIP			6.4 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 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 receiper 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 enamped, or on an attachment with an address

SIGNATURE

Lusell

CHETTE RESSUR 3-22-18 454-781-988