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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # V2

V23024

(5)

R W MANAGEMENT & CONSULTING, INC.

FILED Mar 17 1998 8:00am Secretary of State

n annan arrain raunn dana mhain iadhi dana dabhr dheir dhola dauch dhola dhlia 1004

Principal Place of Business Mailing Address						1 1664) 611616 (1900 1111) 66116 (1811 9191 9191) 6161/ 8161/ 9161/ 9161/ 9161/
1111 PARKCENTRE BLVD STE 102 MIAMI FL 33169		STE 406	1385 CORAL WAY STE 406 MIAMI FL 33145			DO NOT WRITE IN THIS SPACE
US	•					3. Date Incorporated or Qualified
						03/23/1992
 ` ` `	ace of Business	2a. Mailing A	ddress			4. FEI Number Applied For
21		26				65-0423311 Not Applicable
Suite, Apt. a		Suite, Ap				5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State	•	City & Sta	ate			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
23	T. Country	28 Zin		Country		17001 0710 0011111111111111111111111111
Zip			Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
24	25 9. Name and Address of Cu	rrent Registered Age	30 ant	<u>1</u>		10. Name and Address of New Registered Agent
445	<u> </u>			61	Name	
ANTON, EDUARDO 1385 CORAL WAY				82	Street	of Address (P.O. Box Number is Not Acceptable)
	406			83		
MIA	MI FL 33145				·	
				84	City	FL 85 Zip Code
L Affice or re	o the provisions of Sections 607 egistered agent, or both, in the S n familiar with, and accept the o	tate of Florida. Such d	handa was autho	าหวอกกง	/ IDA CON	d corporation submits this statement for the purpose of changing its registered orporation's board of directors. I hereby accept the appointment as registered
SIGNATURE						
	Signature, typed or printed name of registere			jistered Age 13.	ent signature	are required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	DEFICERS	AND DIRECTORS	X DELETE	1.1 TITLE		D Change & Addition
	•		Coccerc	1.2 NAME		_ · · · · · · · · · · · · · · · · · · ·
NAME	ROMAN, ISABELLE A.	CTE 100		1.3 STREET	ADDREDE	RAY, AIAN 1111 Park Centre Blvd., No. 102
STREET ADDRESS	1111 PARKCENTRE BLVD,	, SIE 102				Miami. FL 33169
CITY-ST-ZIP	MIAMI FL	· · · · · · · · · · · · · · · · · · ·		1.4 CITY - S 2.1 TITLE	II - ZIP	THERITY, FL 33109
TITLE	D WACENED DAVID	-		2.2 NAME		
NAME	WAGENER, DAVID	STE 102		2.3 STREET	ADDDECC	
STREET ADDRESS	1111 PARKCENTRE BLVD,	, 315 102				
CITY-ST-ZIP TITLE	MIAMI FL			2. 4 CITY - 5 3.1 TITLE	31+4IF	Change Addition
NAME		_	-	3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
1				3.4. CITY - 9		
CITY-ST-ZIP TITLE				4.1 TITLE		Change Addition
NAME		_		4. 2 NAME		
STREET ADDRESS			•	4.3 STREET	ADDRESS	5
CITY-ST-ZIP				4.4 CITY-S		
TITLE				5.1 TITLE	71	Change Addition
NAME		•		5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	s
1 1			1	5.4 CITY-S		
CITY-ST-ZIP TITLE			l DELETE	6.1 TITLE	71 ° 611	Change Addition
1 1		_		6.2 NAME		
NAME CYPET APPRECE			ŀ	6.3 STREET	ADDRESS	
STREET ADDRESS	•		1	6.4 CITY-S		
I CITY-ST-ZIP I				U.H OILT * 3	11 T 4 H	

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 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 as altochment with an address.