

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

APPROVED  
AND  
FILED

①

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

97 AUG 18 PM 3:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **V34719**  
1. Corporation Name  
**RHYTHM MODULES INC.**

Principal Place of Business Mailing Address  
**480 MARTIN RD.**  
**MARGATE, FLORIDA 33068**

2. Principal Place of Business 2a. Mailing Address  
**480 MARTIN RD.**

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State  
**MARGATE, FLORIDA**

23. Zip 28. Zip  
**33068**

24. Country 29. Country  
**US**

3. Date Incorporated or Qualified 3a. Date of Last Report  
**05/08/1992** **03/01/96**

4. FEI Number Applied For  
**65-0478272** Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**BISSENETTE, ROBERT P.**  
**721 NE 3RD AVENUE,**  
**FORT LAUDERDALE, FL 33304**

10. Name and Address of New Registered Agent

81. Name  
82. Street Address (P.O. Box Number is Not Acceptable)  
83.  
84. City **FL** 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute.

SIGNATURE *Robert P. Bissette* *Scott Levenson* *Scott Levenson (Secretary)* **7/7/97** **7/6/97**

12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P/D	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Dinkins, Larry		1.2 NAME	
STREET ADDRESS	5940 NW 14 CT		1.3 STREET ADDRESS	
CITY-ST-ZIP	Sunrise, FL		1.4 CITY-ST-ZIP	
TITLE	V/D	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Solomon, Lawrence, P.		2.2 NAME	
STREET ADDRESS	9430 NW 21 Manor		2.3 STREET ADDRESS	
CITY-ST-ZIP	Sunrise, FL		2.4 CITY-ST-ZIP	
TITLE	ST/D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Levenson, Scott		3.2 NAME	
STREET ADDRESS	480 Martin Rd		3.3 STREET ADDRESS	
CITY-ST-ZIP	Margate, FL 33068		3.4 CITY-ST-ZIP	
TITLE	V/D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Braff, Humprey		4.2 NAME	
STREET ADDRESS	6211 NW 14 PL		4.3 STREET ADDRESS	
CITY-ST-ZIP	Sunrise, FL 33314		4.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Scott Levenson* **5/13/97** **954-749-6104**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)

2

LAW OFFICES  
OF  
**ANTHONY M. LIVOTI, JR., P.A.**  
ATTORNEYS AND COUNSELORS AT LAW  
721 N.E. 3RD AVENUE  
FORT LAUDERDALE, FLORIDA 33304  
(954) 463-3777

ANTHONY M. LIVOTI, JR.  
MEMBER OF FLORIDA, NEW YORK  
& WASHINGTON D.C. BARS

ROBERT P. BISSENETTE  
MEMBER OF FLORIDA BAR

OF COUNSEL

DONALD E. OSWALD  
MEMBER OF FLORIDA BAR

KENNETH D. TAGUE  
MEMBER OF FLORIDA  
& TEXAS BARS

July 9, 1997

Florida Department of State  
Division of Corporations  
Annual Report Filings  
PO Box 6327  
Tallahassee, Florida 32314

Dear Sir or Madam:

Enclosed please find the 1997 Annual Report for Rhythm Modules, Inc., and a check for \$165 for filing same. The reason my client's Annual Report is late is because your division did not send, or at least I did not receive the 1997 Pre-printed Annual Report.

Although my address as registered agent did change within the last year, I did file a change of address with the US Postmaster. Further, my office called no less than five (5) times since May to request a blank Annual Report, and it did not arrive until June.

After speaking with annual report filings, I was advised that your are still accepting the \$165 because of a backlog in sending out the annual reports. If there has been any change in that status, kindly advise me of same.

Very truly yours,

*Robert P. Bissonnette*

Robert P. Bissonnette, Esq.

RPB:lh