

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 22, 1999 8:00 am
Secretary of State

02-22-1999 90133 008 ***150.00

0367689

DOCUMENT # V54270

1. Corporation Name

RSR YOGURT, INC.

Principal Place of Business

2911 N MILITARY TRAIL
WEST PALM BEACH FL 33409
US

Mailing Address

2911 N MILITARY TRAIL
WEST PALM BEACH FL 33409
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/30/1992

4. FEI Number

65-0364906

Applied For
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 owes the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

HAOSSAIN, MOHAMMAD
2911-A N MILITARY TRAIL
WEST PALM BEACH FL 33409

10. Name and Address of New Registered Agent

81 Name

MASUDA HUQ

82 Street Address (P.O. Box Number is Not Acceptable)

2911-A N. MILITARY TRAIL

83

84 City WEST PALM BEACH

FL

85 Zip Code 33409

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME HOSSAIN, MOHAMMAD
STREET ADDRESS 2806 TENNIS CLUB DR., #300
CITY-ST-ZIP WEST PALM BEACH FL

TITLE DS ☐ DELETE

NAME HUQ, MASUDA
STREET ADDRESS 2806 TENNIS CLUB DR., #300
CITY-ST-ZIP WEST PALM BEACH FL

TITLE D ☐ DELETE

NAME BEGUM, MOFAZZAL
STREET ADDRESS 4940 SARATOGA
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME RUSSELL M. R. J. BAKER
1.3 STREET ADDRESS 2911-A N. MILITARY TRAIL
1.4 CITY-ST-ZIP WEST PALM BEACH FL 33409

2.1 TITLE PRESIDENT ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS 5050 SANCTUARY WAY #F
2.4 CITY-ST-ZIP WPB FL 33417

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-2-98

Date

Daytime Phone #

(521)
471-5377

CR2E034 (1/198)