

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

FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # G86889 (4)

1. Corporation Name
REVELL INVESTMENTS INTERNATIONAL, INC.



Principal Place of Business

Mailing Address

3770 SW 8TH ST
SUITE 200
CORAL GABLES FL 33134
US

3770 SW 8TH ST
SUITE 200
CORAL GABLES FL 33134
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/22/1984	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2375666	
24 Country		30 Country		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 or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

REVELL, WALTER L.
3770 SW 8TH ST
SUITE 200
CORAL GABLES FL 33134

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. 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CD	☐ DELETE	1.1 TITLE	☐ Change ☒ Addition
NAME	REVELL, WALTER L.		1.2 NAME	
STREET ADDRESS	3770 SW 8TH ST STE 200		1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	PDS	☐ DELETE	2.1 TITLE	☐ Change ☒ Addition
NAME	REVELL, SHEILA W.		2.2 NAME	
STREET ADDRESS	3770 SW 8TH ST STE 200		2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		2.4 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	VD	☐ DELETE	3.1 TITLE	☐ Change ☒ Addition
NAME	REVELL, KEITH D.		3.2 NAME	
STREET ADDRESS	3770 SW 8TH ST STE 200		3.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		3.4 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	VDT	☐ DELETE	4.1 TITLE	☒ Change ☒ Addition
NAME	ELMSLIE, DINA R.		4.2 NAME	Elmslie, Dina C.
STREET ADDRESS	3770 SW 8TH ST STE 200		4.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		4.4 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE	VD	☐ DELETE	5.1 TITLE	☐ Change ☒ Addition
NAME	REVELL, ELLIOT N.		5.2 NAME	
STREET ADDRESS	3770 SW 8TH ST STE 200		5.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		5.4 CITY-ST-ZIP	Coral Gables, FL 33134
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
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 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 _____

1-11-98 3051 512-1888

CR2E034 (10/97)