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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 17 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # H03920

(6)

R. K. RENTALS & PROPERTIES, INC.

		· · · · · · · · · · · · · · · · · · ·									
Principal Placi	e of Business	Mailing A	Mailing Address					ILENY WENT	Alani alalı dı	#(1 <b>#191) #1</b> #11	/ WIBIT 1891
P.O. BOX 1055 WINTER HAVEN			P.O. BOX 1055 WINTER HAVEN FL 33882-1055								
							3. Date Incorporated or Qu 05/16/1984	alified		te of Last F   <b>2/1996</b>	Report
2. Principal P	ace of Business	2a. Madir	g Address				4. FEI Number			A	pplied For
21		26					59-2423456				lot Applicable
Suite, Apt		Suite,					5. Certificate of Status Des	ired			Additional lequired
City & Stati	Ć	City 8	l State				6. Election Campaign Fina	ncing			May Be
23		28		1 5			Trust Fund Contribution				to Fees
Zip	Country	Zip				,	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				s. 199.032,
24	25 9. Name and Address of Curre	29	Agont	30			Florida Statutes  10. Name and Address of				
		nt negistered	Agent		81	Name	10. Name and Address of	NOW HO	distelan t	igeni	
	P, BETTY K.					Harrie					
	B HIGHWAY 540 TER HAVEN FL 33880				82	Street A	ddress (P.O. Box Number is Not A	cceptab	ole)		
					83						
					84	City		<u> </u>	FL	<b>85</b> Zip	Code
office or r	to the provisions of Sections 627.05 egistered agent, or both, in the Stat im familiar with and accept the obtaining a Signature, typed or protest many of respected a	le of Florida. Sur gations of, Secti	ch change was on 607.0505, F	authorized lorida Stat	d by utes	the corp s.	oration's board of directors. I herel	у ассер	ot the appo	intment as	registered
12.		ND DIRECTORS	··	13.		3 K 0 B 13 3 0 0	ADDITIONS/CHANGES T	O OFFIC		DIRECTO	RS IN 12
TITLE	PD		DELETE	1.1 [[]	ſι <b>E</b>					Change	
NAME	KEMP, BETTY E.			1.2 NA	ME						İ
STREET ADDRESS	1173 HIGHWAY 540			1.3 ST	REET	ADDRESS					
CITY-ST-7IP	WINTER HAVEN FL			1.4 CI	TY - S	ST-ZIP					
TITLE	***************************************		DELETE	2.1 111	LE					Change	Addition
NAME				2.2 NA	ME						
STREET ADDRESS				2.3 ST	reet	ADDRESS		* .			
CITY-ST-7IP				2. 4 C	TY - 9	ST-ZIP					
TITLE			☐ DELETE	3.1 11	Ιŧ					Change	Addition
NAME				3.2 NA	Мξ						
STREET ADDRESS				3.3 ST	reet	ADDRESS					
CITY - ST - ZIP						ST-ZIP					
TITLE			☐ DELETE	4.1 Ti	LLE					Change	Addition
NAME				4. 2 N	AME						
STREET ADDRESS				4.3 ST	REET	ADDRESS					
CITY - ST - ZIP						ST-ZIP					
TITLE			DELETE	5 1 Til						☐ Change	Addition
NAME				5 2 NA							
STREET ADDRESS						ADDRESS					
CITY - ST - ZIP			DOUGTE			ST-ZIP				<u> Па</u>	
TITLE			☐ DELETE	61711						☐ Change	Addition
NAME STORE LABORISE				62 NA	ME						

CITY-ST-ZIP
14. If do 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.