

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

FILED
Apr 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P22136 (6)

1. Corporation Name
RETAIL CONSTRUCTION SERVICES, INC.



Principal Place of Business 7582 CURRELL BLVD. SUITE 114 ST. PAUL MN 55125	Mailing Address 7582 CURRELL BLVD. SUITE 114 ST. PAUL MN 55125
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 11343 39th Street North Suite, Apt. #, etc.		2a. Mailing Address 26 11343 39th Street North Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/15/1988	
22 City & State 23 Lake Elmo, MN		27 City & State 28 Lake Elmo, MN		4. FEI Number 41-1330800 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 Zip 55042		25 Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
29 Zip 55042		30 Country USA		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				10. Name and Address of New Registered Agent	
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)	
83				84 City	
				85 Zip Code FL	

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	PD BACHMAN, STEPHEN M.	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	7582 CURRELL BLVD STE 114	1.2 NAME	
CITY-ST-ZIP	ST PAUL MN	1.3 STREET ADDRESS	11343 39th Street North
	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	VSD MIDDLETON, GEORGE I.	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	7582 CURRELL BLVD, STE 114	2.2 NAME	
CITY-ST-ZIP	ST. PAUL MN	2.3 STREET ADDRESS	11343 39th Street North
	<input type="checkbox"/> DELETE	2.4 CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE	VT KUNTZ, GERALD F.	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	7582 CURRELL BLVD., STE 114	3.2 NAME	
CITY-ST-ZIP	ST. PAUL MN	3.3 STREET ADDRESS	11343 39th Street North
	<input type="checkbox"/> DELETE	3.4 CITY-ST-ZIP	LAKE ELMO, MN 55042
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		4.2 NAME	
CITY-ST-ZIP		4.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		5.2 NAME	
CITY-ST-ZIP		5.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		6.2 NAME	
CITY-ST-ZIP		6.3 STREET ADDRESS	
	<input type="checkbox"/> DELETE	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: **Gerald F. Kuntz 3-24-98 612-704-9000**

CR2E034 (10/97)