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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P94000078038**1. Corporation Name

**RIM GAS CORPORATION** 

	. •											
Principal Place	e of Business	Mailing /	Address				- 1188111	ilis iim liitii liinsi mesii	1 <b>80</b> 111 <b>99</b> 121 <b>98</b>	EST S <b>wow</b> t 1 <b>6</b> 211	40100 11101	1011 1081
2389 WARWICK DR 2389 WARWICK DR CLEARWATER FL 34623 CLEARWATER FL 34623							DO NOT W	/RITE IN TH	IIS SPACE	=		
							3. Date Incor	porated or Qualif				
							10/24/19	994				
2. Principal P	Place of Business	2a. Maili	ng Address				4. FEI Numb				Applie	
21		26					59-3281	<u>590                                    </u>				plicable
	#, etc	<u> </u>	Apt. #, etc.	•	-	~ -	5. Certificate	of Status Desired			<b>75</b> Addi ee Requir	
City & Stat		27 City	& State				6 Florian C	 ampaign Financir			.00 Ma	——-i
23	ie.	28	a State					ampaign rinancii I Contribution	'9 🗆	• -	Ided to Fo	1
Zip	Country	Zip		Cou	ntry			ration owes the o	urrent year			
24	25	29		30				Property Tax.	•	Yes	<u> </u>	No.
'	9. Name and Address of Currer	nt Registered	Agent				10. Name and	Address of Ne	w Register	ed Agent		
TAVI	LOR, MILDRED G				81	Name						
	WARWICK DR				82 :	Street Addre	ess (P.O. Box Nu	mber is Not Acce	eptable)		•	
	ARWATER FL 34623	•			83							
,				į	03							
	•		•		84 (	City			F	85	Zip Code	•
11. Pursuant	to the provisions of Sections 607.050	02 and 607.150	08, Florida Statute	es, the ab	bove-n	named corpo	oration submits th	is statement for t	he purpose	of changi	ng its reg	istered
office or r agent. I a	registered agent or both in the State	of Florida, Su	ch changa was at	ithorized	l by the	e corporation	n's board of direc	ctors. I hereby ac	cept the ap	pointment	as registe	ered
office or r agent. I a SIGNATURE	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Su ations of, Secti	ch change was au on 607.0505, Flor	uthorized ida Statu	l by the utes.	e corporation	,	ctors. I hereby ac		pointment 	as registe	ered
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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 changen, or organizatement with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS 341