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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600006787 (1)

RPM PROPERTIES, INC.

Principal Place of Business

4210 FIG ST. TAMPA FL 33609

Mailing Address

4210 FIG ST.

FILED Apr 25 1997 8:00am Secretary of State



TAMPA FL 33609	TAMPA FL 33609-2209			
		:	3. Date Incorporated or Qualified 01/18/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address	1	4. FEI Number	Applied For
21 8702 Veranda Way		ida way	65-0641289	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 Tampa, FL	City & State 28 Tampa,	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 U.S.A.	29 33635 30	Dountry U-S_A .		Yes 🔀 No
9. Name and Address of Current	Registered Agent		10. Name and Address of New Reg	istered Agent
STEIJLEN, PAUL		81 Name PA	HUL STEITLEN	1
4210 FIG ST. TAMPA FL 33609		82 Street Addre	ess (P.O. Box Number is Not Acceptable)	way
•		84 City	0 -	85 Zip Code
The Presupent to the provinces of Continue CO7 0500	and 607 1609 Elevida Statuton th		un pa	FL 3365>
 Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of agent. I am familiar with and accept the obligate 	f Florida. Such change was author ions of, S <u>ec</u> tion 607.0505, Florida \$	ized by the corporation Statutes.	on's board of directors. I hereby accep	I the appointment as registered
SIGNATURE Stocker, wood or other place of registered sport	PAUL STET and this if applicable (NO16 Regis	ETLEN	d when reinstating)	4-0-47
12. OFFICERS AND	DIRECTORS 1	3.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE President	☐ DELETE 1	1 TITLE		☐ Change ☐ Addition
NAME Ronald Steile	≧ ∽.	.2 NAME		
STREET ADDRESS 602 S. Oflean	5	.3 STREET ADDRESS		
CITY-ST-ZIP Tampa, FL 37		.4 CITY - ST - ZIP		
TITLE Vice - President	DELETE 2	:1 TITLE		L Change
NAME Paul Steislen	way	.2 NAME		
		3 STREET ADDRESS		
		. 4 CITY - ST - ZIP		Change Iddition
TITLE		1 TITLE		Change Addition
NAME		2 NAME		
STREET ADDRESS		3 STREET ADDRESS		
CITY-ST-ZIP TITLE		I.4. COTY-ST-ZIP		Change Addition
NAME		2 NAME		
STREET ADDRESS	1	3 STREET ADDRESS		
CITY-ST-ZIP		.4 C/1Y - ST - Z/P		
TITLE		1 THLE		Change Addition
NAME	5	.2 NAME		
STREET ADDRESS	Ī	3 STREET ADDRESS		
CITY-ST-ZIP		i.4 CITY-ST-ZIP		
TITLE		LI TITLE		☐ Change ☐ Addition
NAME	6	.2 NAME		
STREET ADDRESS	6	3 STREFT ADDRESS		
CITY-ST-ZIP	6	4 CITY-ST-ZIP		
	10. (1. (1.)		in Only the 110 OZ/OVO Charles Otalists	17 11 17 11 14

I 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 chapted, or on an effectment with an address