

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Spring and Summer
Quarterly Report
Due on or before April 15, 1996

APPROVED
AND
FILED

05 MAY - 1 11:40

TECHNICAL SERVICE
TALLAHASSEE, FLORIDA

DOCUMENT # 848294

(5)

RIDE CORPORATION

15400 NW HWY. 27
OCALA FL 32675

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OCALA FL 32675

(PLEASE WRITE IN THIS SPACE)

3. Date of Incorporation (or 2nd filing)		3a. Date of Last Report	
02/17/1981		05/09/1994	
4. FEI Number	Applied For		
59-2111432	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 has liability for intangible tax under S. 193.032.			
☒ Yes ☐ No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
EHNTHOLT, MERCEDES 15400 NW HWY. 27 OCALA FL 32675		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 190.01, 190.02, and 190.03, Florida Statutes, this 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 193.032, Florida Statutes.

SIGNATURE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, ETC. OF OFFICERS AND DIRECTORS	
1. NAME	D DEGWITZ, LUISA G	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	AVE CUATRICENTENARIA APT. 70	2. STREET ADDRESS	
3. CITY & STATE	RESIDENCIAL ARAGUANAY, VEN	3. CITY & STATE	
1. NAME	DST	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	DEGWITZ DE JIMENEZ, ERIKA	2. STREET ADDRESS	
3. CITY & STATE	URB. GUAPARO CALLE 157 #105-65	3. CITY & STATE	
1. NAME	D	1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS	CURACAO CORP COMPANY NV	2. STREET ADDRESS	
3. CITY & STATE	HANDELSKADE 8	3. CITY & STATE	
1. NAME	D	1. NAME	☐ Change ☒ Addition
2. STREET ADDRESS	CURACAO, NETH ANTILE	2. STREET ADDRESS	
3. CITY & STATE		3. CITY & STATE	
1. NAME		1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS		2. STREET ADDRESS	
3. CITY & STATE		3. CITY & STATE	
1. NAME		1. NAME	☐ Change ☐ Addition
2. STREET ADDRESS		2. STREET ADDRESS	
3. CITY & STATE		3. CITY & STATE	

14. I hereby certify that the information supplied with this filing is complete, true and correct, and that the corporation has the same before the Department of State. I am familiar with and accept the obligations of Section 193.032, Florida Statutes, and that my name appears on the list of officers and directors of the corporation.

SIGNATURE: Luisa S. de Degwitz 4/24/95 904-528-4976