2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 185872

FILED Apr 27, 2003 Secretary of State

Entity Name: RITE INVESTMENT COMPANY, INC.

Current Principal Place of Business:		New Principal Place of Business:		
193 SHIP' AMPA, FL	WATCH CIRC _ 33602	LE		
Current Mailing Address:		New Mailing Address:		
193 SHIP' AMPA, FL	WATCH CIRC _ 33602	LE		
El Number:	59-6182111	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
ame and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
	WATCH CIRC _ 33602 US			
ne above		submits this statement for the	ourpose of changing its registere	ed office or registered agent, or both,
ne above the State	named entity s of Florida. RE:			
ne above	named entity s of Florida. RE:	submits this statement for the particular sta		ed office or registered agent, or both, Date
ne above the State	named entity set of Florida. RE: Electron			
ne above the State GNATUF ection Can	named entity set of Florida. RE: Electron	ic Signature of Registered Ag Trust Fund Contribution ().	ent	
ne above the State GNATUF ection Can	named entity set of Florida. RE: Electron Inpaign Financing S AND DIREC	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete LES III	ent	Date
ne above the State GNATUF ection Can FFICERS ele: ame: ldress:	named entity see of Florida. RE: Electron npaign Financing S AND DIREC D () FALLEN, CHAR 712 DORADO O BRANDON, FL	ic Signature of Registered Ag Trust Fund Contribution (). TORS: Delete LES III ET 33511 Delete DHN CH CR	ent ADDITIONS/CHANG Title: Name: Address:	Date BES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN J. PICHOWSKI PD 04/27/2003