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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 338613

(3)

| 3. Corporatio | Name R'S CORPORATION | | | | | | | | | | |
|--|---|----------------------------------|---------------------------------------|-----------------------|-------------------|---------------------------------------|--|--|---------------------------------------|-----------------------------|--|
| | | | | | | | | | | | |
| Principal Plac | e of Business | Mailing Address | | | | I | | IIII IIIII JAIF | | | |
| 1401 N. FEDERAL HWY HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-2847 | | | | | | | | | | | |
| | | | | | | | ate Incorporated or Qualific | | Date of Last Re /22/1996 | eport | |
| 2. Principal Place of Business | | 2a. Mailing Addr 26 | 2a. Mailing Address 26 | | | | F Number 5 9-1280470 | | · · · · · · · · · · · · · · · · · · · | oplied For ot Applicable | |
| Suite, Apt. #, etc. | | <u></u> †₁ | Suite, Apt. #. etc. | | | 5. Ce | ertificate of Status Desired | | \$8.75 A | | |
| City & State | 0 | City & State | · · · · · · · · · · · · · · · · · · · | | | 6. Fl | 6. Election Campaign Financing \$5.00 May Be | | | | |
| 23 | | 28 | 28 | | | Trust Fund Contribution Added to Fees | | | | | |
| Zip | Country | Zip | · | | ' | | 8. This corporation has liability for intangible tax under s. 199.032, | | | | |
| 24 25 9. Name and Address of Currer | | 29 Surrent Benistered Agent | 30] | | | | orida Statutes ame and Address of New | Yes Penisterer | TO A THE SAME STORY ASSESSED. | | |
| ZINK | LER, GEORGE JR. | diretti negistereti Agent | | 81 | Name | 10, 14 | ame and Address of New | negisteret | Manir | | |
| | N. FEDERAL HWY | | | | Charles A delay | /D 6 | B H () H () | | | | |
| | LYWOOD FL 33020 | | | 62 | Street Add | aress (F.O | . Box Number is Not Accep | itable) | | | |
| | | | | 63 | | | | | | | |
| • | | | | 84 | City | | | <u>. </u> | 85 Zip (| Code | |
| 44 Direction | to the provisions of Sections 60 | 7 0(02 and 607 1(00 Line) | lo Crotuton | the electric | | tion o | the wife this plate would for the | FL | | | |
| office or r | to the provisions of Sections 60 egistered agent, or both, in the m familiar with, and accept the | State of Florida, Such chan | ne was auth | orized by | the cornora | rporation's ation's boa | ubmits this statement for the reby ac | cept the ap | pointment as | s registered registered | |
| SIGNATURE | Signature, typed or printed name of regists | sed agent and lide if applicable | (NO) L Ho | pistered Aga | al signature requ | gired when re- | nstational | DATE | | | |
| 12. | OFFICER | S AND DIRECTORS | | 13. | | ADI | DITIONS/CHANGES TO OF | FICERS AN | D DIRECTOR | S IN 12 | |
| TITLE | PD DELETE | | LETE | 11 ווון 1 | | | | | Change | Addition | |
| NAME | ZINKLER,ELLEN E 1401 N. FEDERAL HWY. | | | 12 NAME | | | | | | | |
| STREET ADDRESS | HOLLYWOOD FL | | | 13 STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | | | 111 | 14 CHY+SI+ZIP | | | | | Change | Addition | |
| TITLE NAME | ZINKLER, GEORGE JR. | | 1116 | 21 HTLF 22 NAME | | | | | [] Change | ☐ Addition | |
| STREET ADDRESS | 1401 N. FEDERAL HWY. | | | 2.3 STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | HOLLYWOOD FL | | | 2.4 C(TY+5 | | | | | | | |
| TITLE | DELETE | | LETE | 3.1 TITLE | | | | | Change | Addition | |
| NAME | | | | 3.2 NAME | | | | | • | | |
| STREET ADDRESS | | | | 3 3 STREET | ADDRESS | | i | | | | |
| CITY-ST-ZIP | | | | 3.4. CITY - 9 | 61 - 7(P | | | | | | |
| TITLE | | [][| LETE | 4.1 THLE | | | | | Change | L Addilion | |
| NAME | | | | 4. 2 NAME | | | | | | | |
| STREET ADDRESS | | | | 4.3 STREET | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | (FTE | 4.4 CITY - S | 1 - ZIP | | | | 06 | | |
| TITLE | | L.) DE | 1112 | 5.1 TILLE | | | | | Change | Addition | |
| NAME STREET ADDRESS | | | | 5.2 NAME | ADODICO | | | | | | |
| CITY-ST-ZIP | | | | 5.3 STREET | | | | | | | |
| TITLE | | DE | LÉTE | 54 CITY-S 61 TITLE | 1-211 | | | | Change | Addition | |
| NAME | | ي | | 6.2 NAME | | | | | | | |
| STREET ADDRESS | | | | G.3 STREET | ADORESS | | | | | | |
| CITY-ST-ZIP | | | | 6.4 CITY - S | | | | | | | |

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 eath; 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.