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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

376777 **DOCUMENT #**

(9)

RINDOM GALLERIES INC.

POMPANO BCH. FL 2000- 33 073

	**	-,
Principal Place of Business		Mailing Address

5311 N.W. 77TH CT. POMPANO BCH. FL 33073 5311 N.W. 77TH CT. POMPANO BCH. FL 33073

4	Zip	Country 25	28 Zipi	[Co	untry	8. This corporation has liability for	rs ∐No	
City & State		├─¹ ´	City & State		6. Flection Campaign Financing Trust Fund Contribution		\$5.00 May Be	
2	Suite Apt. #, etc		Suite, Apt 4	#, etc		5. Certificate of Status Desired		\$8.75 Additional Fee Required
Principal Place of Business		2a. Malii (j Add 26	2a. Made y Arbiress 26		4. FEI Number 59-1390094	4. FEI Number 59-1390094		
						 Date Incorporated or Qualified 02/08/1971 	3a . Da	te of Last Report 06/14/1995

11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the 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. Thereby accept the appointment as registered agent. I am

83

84 City

familiar with,	and accept the obligations of, Section 607.050	5, Florida Statutes	the angle of the compact content of the term	the contract of the contract o	3		
SIGNATURE	gnature i typied on printed manne Of regulated Lager 1 and 11 of flagilik.	okas (*4°)	 H. Begistared Agent signature required	where ward daily CATE			
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SPD	☐ DELETE	1 1 THUE	☐ Change	☐ Addition		
NAME	RINDOM, ERNEST		1.2 NAMÉ				
STREET ADDRESS	5311 N.W. 77TH CT.		1.3 STREET ADDRESS				
CITY-ST-ZIP	POMPANO BCH. FL 330	73	1.4 CHY+S1 ZIP				
TITLE		DELETE	2 1 TITLE	☐ Change	Addition		
NAME			2.8 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-ST-ZIP			2.4 CITY - ST. ZIP				
TITLE		DELETE	3 1 HILE	Change	□ Add₁tion		
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY - ST - ZIP			34 C TY ST ZIP				
TITLE		☐ DEFELE	4 1 TiTLF	☐ Change	Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CHY - S1 - 7:P				
TITLE		DELETE	5 FITLE	☐ Change	Add tion		
NAME			5 2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY - ST - ZIP		.,	5 4 CITY - ST - ZIP				
TITLE		DELETE	€ 1 TitLE	☐ Change	Addition		
NAME			6.2 NAME				
STREET ADDRESS			6 3 STREFT ADDRESS				

14. Too hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual eport 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 combination or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or on a a trachment with an address

6.4 CITY - S1 - ZIP

Zip Code