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

**FILED PROFIT** Apr 20 1998 8:00am FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT #
1. Corporation Name 587485 R.E.T. ENTERPRISES, INC. Principal Place of Business Mailing Address 1158 A. GILLESPIE AVE 1156A GILLESPIE AVE SARASOTA FL 34236 SARASOTA FL 34236 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/20/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1853396 Not Applicable Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζφ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \square \text{No} No 24 25 30 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WEBER, H. ALLAN 2070 RINGLING BLVD. 82 Street Address (P.O. Box Number is Not Acceptable) SARASOTA, FL. 33577 83 84 City Zip Code 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition NAME THOMPSON, RONALD E. 1.2 NAME 2730 INGOT PLACE STREET ADDRESS 1.3 STREET ADDRESS **SARASOTA FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 IIILE Change Addition NAME THOMPSON, RONALD E 2.2 NAME STREET ADDRESS 2730 INGOT PLACE 2.3 STREET ADDRESS CITY-ST-ZIP **Sarasota Fl** 2. 4 CITY - ST - ZIP ☐ DELETE TITLE 3.1 TITLE Change Addition NAME THOMPON, RONALD E 3.2 NAME STREET ADDRESS 2730 INGOT PLACE 3.3 STREET ADDRESS **SARASOTA FL** CITY-\$T-ZIP 3.4. CITY-ST-ZIP DELETE TITLE ŠĪ 4.1 TITLE Change Addition THOMPSON, RONALD E NAME 4. 2 NAME 2730 INGOT PLACE STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP **SARASOTA FL** 4.4 CITY-ST-ZIP DELETE TITLE 51 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE 6.1 TITLE Addition

14. I 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 changed, or on an attachment with an address.

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST- ZIP

NAME

STREET ADDRESS