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

Mailing Address

**PROFIT CORPORATION** ANNUAL REPORT

R.E.T. ENTERPRISES, INC.

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # 587485

## FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90081 040 \*\*\*150.00



1156 A. Gillespie ave Sarasota FL 34236 US		1156A GILLESPIE AVE SARASOTA FL 34236 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  09/20/1978		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
า		26			59-1853396		Not Applicab
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		75 Additional
2	- · · · · · · · · · · · · · · · · · · ·	27			5. Certificate of Status Desired	- Fe	e Required -
City & State	•	City & State		•	6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country 25	Zip 29	Country 30	· •	This corporation owes the current year     Personal Property Tax.	Intangible Yes	□Ño
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Registere	d Agent	
			81	Name			
WEBER, H. ALLAN 2070 RINGLING BLVD. SARASOTA, FL. 33577			82	Street Add	Iress (P.O. Box Number is Not Acceptable)		
SARA	ASOTA, FL. 33577		83				
			84	City		85	Zip Code
SIGNATURE	egistered agent, or both, in the State on familiar with, and accept the obligated as a state of registered agent states of registered agent agen			•	poration submits this statement for the purpose ion's board of directors. I hereby accept the app.  . red when reinstating) DATE	ointment a	as registered
		D DIRECTORS	13.	it agriatoro reguir	ADDITIONS/CHANGES TO OFFICERS	AND DIRE	CTORS IN 12
TITLE	P	DELETE	1.1 TITLE		ADDITIONO/OTENCES TO OTT TOETRO	Cha	
į.	THOMPSON, RONALD E.	C berrie	1.2 NAME			_	• –
NAME	2730 INGOT PLACE		1.3 STREET	LADDRESS			
STREET ADDRESS							
CITY-ST-ZIP	SARASOTA FL VP	DELETE	1.4 CITY-S 2.1 TITLE	1.219		☐ Cha	ange Addit
TITLE		(1) DEEC ! C	2.2 NAME				<b>.</b> –
NAME	THOMPSON, RONALD E		2.3 STREE	T ADDDECC			
STREET ADDRESS	2730 INGOT PLACE						_
CITY-ST-ZIP 7	SARASOTA FL D	☐ DELETE	2. 4 CITY-5 3.1 TITLE	01-ZIP		Cha	ange
TITLE	•		3.2 NAME			_	• –
NAME	THOMPON, RONALD E 2730 INGOT PLACE		1	T ADDRESS			
STREET ADDRESS			3.4. CITY-5				
CITY-ST-ZIP TITLE	SARASOTA FL ST	☐ DELETE	4,1 TITLE	11-219		☐ Cha	ange
NAME	THOMPSON, RONALD E		4. 2 NAME			_	•
	2730 INGOT PLACE			T ADDRESS			
STREET ADDRESS	SARASOTA FL		4.3 STREE				
CITY-ST-ZIP TITLE	JANASUIA FL	☐ DELETE	5.1 TITLE	1-215		Cha	ange
1			5.2 NAME			_	
NAME STREET ADDRESS			5.3 STREE	ADDRESS			
STREET ADDRESS			5.4 CITY-S				
CITY-ST-ZIP TITLE	<del></del>	☐ DELETE	6.1 TITLE	-		☐ Cha	ange Addi
			6.2 NAME				
NAME	l			T ADORESS			
STREET ADDRESS			6.4 CITY-S	1			
CITY-ST-7IP	•		0.4 01111-3	1-441 B	_		

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, with all other like empowered.

SIGNATURE:

941 957 1107