FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 1:04
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # 692472 (4)

1. RON - TU, INCORPORATED

Principal Place of Business:
4401 PETERS ROAD
C/O ERWIN FRANCIS SNYDER
PLANTATION FL 33317

Mailing Address:
4401 PETERS ROAD
C/O ERWIN FRANCIS SNYDER
PLANTATION FL 33317

3. Date Incorporated or Qualified: 06/29/1981
3a. Date of Last Report: 06/03/1994
4. FEI Number: 59-2108389 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.062, Florida Statutes: X Yes ☐ No

2. Principal Office (if changed) 21 / 22 Suite, Apt # etc. / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address 26 / 27 Suite, Apt # etc. / 28 City & State / 29 Zip / 30 Country

9. **Name and Address of Current Registered Agent**

SNYDER, ERWIN FRANCIS
4401 PETERS ROAD
PLANTATION FL 33317

10. **Name and Address of New Registered Agent**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PV	☐ Change ☐ Addition
NAME	SNYDER, ERWIN FRANCIS	
STREET ADDRESS	10451 NW 24TH CT.	
CITY-ST-ZIP	SUNRISE FL	
TITLE	ST	☐ Change ☐ Addition
NAME	SNYDER, MARGARET ELAINE	
STREET ADDRESS	10451 NW 24TH CT.	
CITY-ST-ZIP	SUNRISE FL	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I 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)(n), 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 or on an attachment with an address.

SIGNATURE: Erwin Francis Snyder 4-30 X 583 8706
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0226807 CP