

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

APPROVED
AND
FILED

95 APR 28 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995	 FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F94000003710 (0)

1. Corporation Name

RUMBLE'S ENTERPRISES, INC.

Principal Place of Business 513 ASHBY WAY WARNER ROBINS GA 31088	Mailing Address 513 ASHBY WAY WARNER ROBINS GA 31088
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 07/15/1994
3a. Date of Last Report 1/95

2. Principal Place of Business 21 FT. WALTON Beach Suite, Apt. #, etc. 22 786 N. BEAL PKWY. City & State 23 FWRB FL Zip 24 32547	2a. Mailing Address 26 SA Suite, Apt. #, etc. 27 ME City & State 28 Zip 29 Country 30
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4. FEI Number 59-3245591	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
6. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 S. PINE ISLAND RD. PLANTATION FL 33324

10. Name and Address of New Registered Agent 81 Name REAL RUMBLE 82 Street Address (P.O. Box Number is Not Acceptable) 513 ASHBY WAY 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD PRESIDENT RUMBLE, NEAL 513 ASHBY WAY WARNER ROBINS GA 31088	1. TITLE P 2. NAME Rumble, NEAL 3. STREET ADDRESS 513 ASHBY WAY 4. CITY - ST - ZIP WARNER ROBINS, GA 31088	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	NO SECRETARY RUMBLE, FREDERICK BERT 218 PELHAM RD. FT. WALTON FL 32547	2. TITLE S 3. NAME RUMBLE, BERT 4. STREET ADDRESS 786 N. BEAL PKWY 5. CITY - ST - ZIP FT. WALTON Beach, FL 32547	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	STD VICE PRESIDENT RUMBLE, GINNY 218 PELHAM RD. FT. WALTON FL 32547	3. TITLE UP 4. NAME RUMBLE, GINNY 5. STREET ADDRESS 786 N. BEAL PKWY 6. CITY - ST - ZIP FT. WALTON Beach, FL 32547	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	TREASURER BETTY RUMBLE 513 ASHBY WAY WARNER ROBINS GA 31088	4. TITLE T 5. NAME BETTY RUMBLE 6. STREET ADDRESS 513 ASHBY WAY 7. CITY - ST - ZIP WARNER ROBINS, GA 31088	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		5. TITLE 6. NAME 7. STREET ADDRESS 8. CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		6. TITLE 7. NAME 8. STREET ADDRESS 9. CITY - ST - ZIP	☐ Change ☐ Addition

14. I do 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 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/95

9/12/95

1201 HAYS STREET
TALLAHASSEE, FL 32301
904-222-9171
904-222-0393 FAX

800-342-8086



ACCOUNT NO. : 072100000032

REFERENCE : 603440 86901D

AUTHORIZATION :

Patricia Pizut

COST LIMIT : \$ 233.75

ORDER DATE : May 23, 1995

ORDER TIME : 9:40 AM

ORDER NO. : 603440

CUSTOMER NO: 86901D

CUSTOMER: Ms. Deborah Sarnataro
Prentice Hall Legal &
375 Hudson Street

New York, NY 10014

ANNUAL REPORT FILING

NAME: VIACOM INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea Guma

EXAMINER'S INITIALS:

MS

RECEIVED
MAY 23 AM 10:08
DIVISION OF CORPORATION