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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # H09365 1. Corporation Name

REX STOCKER, INC.

Principal Place of Business Mailing Address						619:1 WINIT 6191	
14095 81ST AV		14095 81ST AVENUE					
SEBASTIAN FL 32958 SEBASTIAN FL 32958				DO NOT WRITE IN TI		S SPACE	
	•				3. Date Incorporated or Qualifed		
				•	06/25/1984		
Principal Place of Business     2a. Mailing Address							Applied For
21 26					59-2685512		Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional	
22 27				Fee Requi		tequired	
City & Stat	e ·	City & State	<b>¬</b> '		6. Election Campaign Financing \$5.00 May Be		•
Zip Country		28 Zip	Zip Country		Trust Fund Contribution Added to Fees		
			30		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☑ No		HINO
24   25   29   9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent		
5. Name and Address of Other Registered Agent				Name	to: Maine and Madreso of Main Hagister	. riguin	
VANDEVOORDE, RENE G.						<u> </u>	
1327 N CENTRAL AVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
SEB	ASTIAN FL 32958	•	83				
		•	<u> </u>				<u> </u>
			84	City	FI	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute				e-named corp	poration submits this statement for the purpose of	f changing it	s registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was a gations of Section 607 0505. Flo	uthorized by rida Statutes	the corporati	on's board of directors. I hereby accept the appo	intment as r	egistered
-		30.00.00 oil a annois (07.0000) i ia	((2.2.2.2				
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE	: Registered Agen	t signature require	ed when reinstating) DATE	<del> </del>	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE -	TS	DELETE 1.11				☐ Change	☐ Addition
NAME			1.2 NAME				
STREET ADDRESS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1.3 STREET ADDRESS				
CITY-ST-ZIP	SEBASTIAN FL		1.4 CITY- \$1	r-ziP			
TITLE	–		2.1 TITLE			Change	☐ Addition
NAME	STOCKER, REX		2.2 NAME				
STREET ADDRESS	1 1111111111		2.3 STREET	ł			
CITY-ST-ZIP			2.4 CITY-S	T- ZIP		Change	Addition
TITLE	The second	□ Nere ie	3.1 TITLE			□Change	☐ Addition
NAME			3.2 NAME	1000000			
STREET ADDRESS	14		3.3 STREET				1
CITY-ST-ZIP			3.4. CITY-S 4.1 TITLE	1.715		☐ Change	Addition
NAME .		,	4. 2 NAME				
STREET ADDRESS	74.	v ·	4.3 STREET	ADDRESS			
CITY-ST-ZIP	<b>'</b> .	* .	4.4 CITY-ST				
TITLE ·		☐ DELETE	5,1 TITLE			Change	Addition
NAME		5.2		-		_ •	_
STREET ADDRESS			5.3 STREET	ADDRESS			!
CITY-ST-ZIP			5.4 CITY- S7	•ZIP			
TITLE	\$10.00 Ex.10	☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				ĺ

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 chapped, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

**FILED** 

Jan 22, 1999 8:00am

**Secretary of State** 01-22-1999 90048 013 \*\*\*150.00