

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **H20634** (2)

1. Corporation Name

R.P.L. HOLDING CO., INC.



Principal Place of Business

**2100 N. STATE ROAD 7
HOLLYWOOD FL 33021**

Mailing Address

**2100 N. STATE ROAD 7
HOLLYWOOD FL 33021**

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

09/12/1984

3a. Date of Last Report

01/23/1995

21 State, Apt. #, etc.

26 State, Apt. #, etc.

4. FEI Number

59-2498217

Applied For

Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

23 Zip

25 Country

28 Zip

30 Country

6. Election Campaign Financing
Trust Fund Contribution



**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**EVERATT, R.L.
1255 LAUREL CT.
FT. LAUD FL 33326**

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 607.1504, 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. Registered Agent Signature (Required for all filings)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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 registered 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 is signed on an attached sheet in address.

15. SIGNATURE

16. DATE

17. NAME

18. STREET ADDRESS

19. CITY, ST., ZIP

20. TITLE

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