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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name H37545

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Mar 04 1998 8:00am

Secretary of State

REPUBI	LIC BROKERAGE CORP.				
Principal Place	e of Business	Mailing Address		T IMBERTA BINDE FILLE FERRE BEITE BINDE BINDE	91011 01011 91011 91011 01911 01911 1001
4400 CONGRE	ESS AVE.	P.O. BOX 4298			
W. PALM BCH. FL 33407 WEST PALM BEACH FL 33			3402-4298	DO NOT WRITE IN THIS SPACE	
US				3. Date Incorporated or Qualified	N THIS SPACE
				01/10/1985	·
9 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21	acc of Basiness	26		59-2561122	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			S8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	2.110	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid	<u> </u>
24	25	29	30	Personal Property Tax due June 3	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Reg	istered Agent
	etcher, John S		81 Name		
530	00 S.E. FINANCIAL CENTER		82 Street Ad	dress (P.O. Box Number is Not Acceptable	e)
200 S. BISCAYNE BLVD.			83		
MIA	AMI FL 33131-9339		83		
			84 City		85 Zip Code
				the state of the s	FL 83 Zip Cook
office or re agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	oz and 607.1508, Florida Statur e of Florida. Such change was a gations of, Section 607.0505, Fk	es, the above-hamed co authorized by the corpor orida Statutes.	orporation submits this statement for the puration's board of directors. I hereby accept	the appointment as registered
SIGNATURE					
	Signature, typod or printed name of registered as		E: Registered Agent signature red	quired when reinstalling)  ADDITIONS/CHANGES TO OFFICE	DATE
12.	CDP OFFICERS AT	ND DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICE	Change Addition
TITLE	SCHUPP, R.E.	otter	1.2 NAME		
NAME	706 XANADU		1.3 STREET ADDRESS		
STREET ADDRESS	JUPITER FL		1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	DT	DELETE	2.1 TITLE		Change Addition
NAME	HASKINS, RICHARD J		2.2 NAME		_ , _
STREET ADDRESS	P.O. BOX 4298 N/A		2.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		2. 4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	RATHKE, RICHARD C.	_	3.2 NAME		
STREET ADDRESS	364 GOLFVIEW RD 201		3.3 STREET ADDRESS		i
CITY-ST-ZIP	N. PALM BEACH FL		3.4. CITY-ST-ZIP		
TATLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY+ST-ZIP		
TITLE	<u> </u>	☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS		_	6.3 STREET ADDRESS		
CITY-ST-ZIP		<b>.</b>	6.4 CITY - ST - ZIP		
	certify that the information supplied on this annual report of supplement	with this fling does not qualify for	or the exemption stated	in Section 119.07(3)(i), Florida Statutes. I fi sture shall have the same legal effect as if s	urther certify that the information
officer or	on this annual report of supplement director of the corporation or the fell	tal abhuay eport is true and acc cepter of trustee empowered to	execute this report as re	equired by Chapter 607, Florida Statutes; a	and that my name appears in

I hereby certify that the informatio indicated on this annual report of officer or director of the corporation Block 12 or Block 13 if changes.