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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	MENT # H60330 RINE INVESTMENT CORP.	0 (8)			01011 B1011 61011 61011 91811 01911 1091
Principal Piac	ce of Business	Mailing Address			
12925 SW 61ST. AVE.		12925 SW 618T. AVE. MIAMI FL 33158-7172			
MIAMI FL 3315	30	WIKWI 11 991901114			
				3. Date Incorporated or Qualified 06/05/1985	3a. Date of Last Report 05/01/1996
······	Place of Business	2a, Mailing Address		4, FEI Number	Applied For
Suite, Apt	# oto	Suite, Apt. #, etc.		59-2540067	Not Applicable \$8.75 Additional
22 Suite, Apr.	π, εκ.	27		5. Certificate of Status Desired	Fee Required
City & Stal	l¢:	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Z _(P)	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for it	
24	25	29	30		Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	gistered Agent
	RENBERG, DONALD		81 Name		
12925 SW 61ST. AVE. 82 Street AC			ress (P.O. Box Number is Not Acceptab	le)	
MIA	MI FL 33156		83		
			84 City		FL 85 Zip Code
11. Parsuant office or agent 1 a SIGNATURE				poration submits this statement for the p tion's board of directors. I hereby accep	· · · · · · · · · · · · · · · · · · ·
12.	Signature, typical or printed name of registered at OFFICERS At	gent and this it applicable (NO ND DIRECTORS	TE: Registered Agent signature requi	ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
1:11f	P	DELETE	1.1 TIFLE	700/10/10/01/10/10 10 01/10	Change Addition
NAME	SCHNEIDER, MARK		1.2 NAME		
S*REET ADDRESS	12925 SW 61ST. AVE.		1.3 STREET ADDRESS		
C(TY - ST - ZIP	MIAMI FL 33156		1.4 CITY-ST-ZIP		
THE	VST	☐ DELETE	2.1 TITLE		Change Addition
NAME	GORENBERG, DONALD		2.2 NAME		
STREET ADORESS	12925 SW 61ST. AVE. MIAMI FL 33156		2.3 STREET ADDRESS		
DILY-51-20F	MIMMI FL 33100	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		E DEEK IK	32 NAME	1	Fin Avenão Fil monitoti
STREET ADCRESS			3.3 STREET ADDRESS		
Ç:TY+S1+ZiP			3.4. CITY - ST - ZIP		
1171.1		DELETE	4.1 TITLE	***************************************	Change Addition
NAME			4. 2 NAME		Ì
STREET ADDRESS			4.3 STREET ADDRESS		Į
CHY-ST-7P			4.4 CITY-ST-ZIP		
Total Comments		DELETE	51 TITLE		Change L Addition
NAMI Organia Appropriate			5.2 NAME		1
STREET ADDIESSS			5.3 STREET ADDRESS		
CHY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME		hand process to	6.2 NAME		Second Sci (Sec.)
SARFEL ADDIBLESS			6.3 STREET ADDRESS		

64 CITY-ST-ZIP

SIGNATURE:

14. If do 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 changed, or on an attachment with an address. 305 669-0628

FILED

May 19 1997 8:00am

Secretary of State