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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 27 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS .

DOCUMENT # H77793

(8)

RAIN SALT, INC.

COLY-ST ZIF

Principal Place	e of Business	Mailing	Address			J						
% DAVID ROBE 1720 S. NOVA DAYTONA FL 3	RD.	1720 S.	% DAVID ROBBINS 1720 S. NOVA RD. DAYTONA FL 32119-1728									
partiolar 12 c	2110						3. Date Incorp 09/19/19	oorated or Qualified	3a. Date o		port	
2. Poncipal P	Sace of Business	2a. Mail	ing Address				4. FEI Numbe		1 001001		olled For	
21		26	26				59-2587	7725		Not	Applicable	
Suite, Apt	#, etc.	Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional					
22		27					J. Certificate	Of Otalus Expanses		Fee Rec	quired	
City & Stat	0	}	City & State				6. Election Campaign Financing \$5.00 May Be					
23		28					Trust Fund Contribution L. Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,					
Zip	Country	Zip			intry		,				199.032,	
24	25						Florida Statutes Yes No 10. Name and Address of New Registered Agent					
	9. Name and Address of Curr	ent Registered	Agent		81	Name	jų, kame and					
~ ROBBINS, DAVID W.					"	Ivanie	WILLIAM	1 MeC	rus	₩ ٥		
	O S NOVA RD.							mber is Not Acceptat				
DAY	TONA FL 32019		. 83				146 DER	by shape re	7 0 0			
•					63		1					
					84	City	DAWNERA	BEALH	FL	35 Zip C	ode 2117	
11. Parsuant	to the provisions of Sections 607.0	502 and 607.15	08, Florida Stati	utes, the a	bove-	named co	orporation submits th	nis statement for the	ourpose of ch	anging its	s registered	
office or agent 1 a	te the provisions or sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob-	ate of Florida. Si ligations₊of, Se	uch change was stion 607.0505. F	s authorize Florida Sta	id by 1 tutes.	the corpora	ation's board of dire	ectors, i nereby acce	pt ine appoin	tment as r	regisiereo	
	Ohlestian M		200						412	4/1	12	
SIGNATURE	Sign if we type it or profeed hards of registered	agen and tile if appl	icable (NC	DIE Registere	d Ageni	t signature req	jured when reinstating)		DATE	'/		
12.		AND DIRECTOR		13.				CHANGES TO OFFI	CERS AND D	RECTOR		
TIFLE	DP		DELETE	1.1 T	ITLE		PRESIDENT	proceedians		Change	Addition	
NAME	ROBBINS, DAVID W.			1.2 N	IAME		WILLIAM "	BY SHIPE ROK	Ś			
STREET ADORESS	1720 S. NOVA RD.			1.3 S	TREET A	ADDRESS	MOTHER		3271	-		
CDY-\$1.20€	SOUTH DAYTONA FL			1.4 0	ITY - ST	- ZIP		, JO 1-11 3 1 C				
1:11.6			DELETE	2.1 \$	ITLE		ALCE LYEL	DENT, DIRECT	'R L] Change	Addition	
NAM:					2.2 10 1010		CHANE W	CUENCE CO	. Α			
STREET ACCRESS				2.3 S	TREET A	ADDRESS	846 PBS	MIHIRE RAA			ļ	
GDY 51-26					CITY - ST	r- ZIP	THAT I	BEARLY SEC.		1	Address	
HILE			L] DELETE	311	ITLE				L.	Change	Addition	
HAME	\			32 N	IAME							
STREET ADDRESS				335	STREET #	ADORESS						
CHY SE ZIP			C) SELETE		CITY-ST	T-ZIP				Change	Addition	
300			☐ DELETE	4.1 T					L.	j Change	L_3 Adomini	
NAMI					NAME						,	
STREET ADDRESS						ADDRESS						
CHY SEZIP			DELETE		CITY-ST	-7iP				Change	Addition	
TIME			☐ DELETE		TITL E	1				Johnnge	Land 1 World 1	
NAME:					NAME STREET	ADDDECC						
STREET ADDRESS						ADDRESS						
CITY-ST ZIP	.,		DELETE		CITY-ST	- ZIP			Г	Change	Addition	
10116			☐ DETEIR		IIILE				<u> </u>	2 Other Ma	- Montoff	
N4M:					NAME							
STREET ALADRESS	i			6.3 3	STREET	ADDRESS						

6 4 CITY - ST - ZIP

14. I 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.