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 #

H79878

(5)

R. L. CONSULTING COMPANY

FILED Mar 09 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address	Mailing Address			T TODIELI ALLI LIDDIO (DIOLI IDILI DAGDI (BILI DI	DAY BIRKI BIRKI BIRKI	OFBIL DIVIN 1001
224 PROVINCIAL DRIVE		224 PROVINCIAL	224 PROVINCIAL DRIVE			•		
INDIALANTIC FL 32903			INDIALANTIC FL 32903			DO NOT WRITE IN	THIS SPACE	
US		US				3. Date Incorporated or Qualified	I IIIS SPACE	•
İ						10/08/1985		
2. Principal P	lace of Business	2a. Mailing Addres	s			4. FEI Number	1-1	Applied For
21		26	26			59-2551749	· · · · · · · · · · · · · · · · · · ·	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 \$8.75	Additional
22		27				5. Commodition States Desired	Feel	Required
City & State		City & State	 			6. Election Campaign Financing		O May Be
Zip Country			Zip Country			Trust Fund Contribution		d to Fees
24	25 29		30			 This corporation owes or has paid the Personal Property Tax due June 30. 		ntangible No
9. Name and Address of Current Registered Agent					-	10. Name and Address of New Regist		<u> </u>
MK	DRONI, GRACIELA R			31 N	lame			
	4 PROVINCIAL DRIVI		-	12 S	4	(D.O. Double in No. 1 No. 1 Access to No.		
	DIALANTIC FL 32903		1	2 5	reer Addre	ss (P.O. Box Number is Not Acceptable)		
			1	13				
ļ			<u> </u>	4 C	ity			- Code
	_				-		FLII	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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								
		e of registered agent and little if applicable	(NOTE: Registered /	gent sig	gnature required		ATE	-
12.	P\$T °	FFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
1		☐ DELET					☐ Change	☐ Addition
NAME STREET ADDRESS	MORONI, GRACIE 224 PROVINCIAL		1.2 NAM					
CITY-ST-ZIP	INDIALANTIC FL	DUIAE	1.3 STRE					
TITLE	RIDITOTE	DELE1	1.4 CITY TE 2.1 TITU		<u> </u>		☐ Change	Addition
NAME			2.2 NAME				Grange	
STREET ADDRESS			2.3 STRE		RESS			
CITY-ST-ZIP			2.4 CIT		•	•	• .	
TITLE		☐ DELET					Change	Addition
NAME			3.2 NAM	E			- •	
STREET ADDRESS			3.3 STRE	ET ADDE	RESS			
CITY-ST- Z IP			3.4. CITY	- ST- ZII	P			
TITLE		☐ DELET	E 4.1 TITLE				☐ Change	☐ Addition
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	et addf	RESS			
CITY-ST-ZIP			4.4 City	-ST-ZIP	·			
TITLE		[]] DELET					☐ Change	Addition
NAME			5.2 NAM					
STREET ADDRESS			5.3 STRE					ļ
CITY-ST-ZIP		Poter	5.4 CITY		<u> </u>			1.000
TITLE		☐ DELET					L Change	Addition
NAME CIRCLI ADDRESS			6.2 NAMI					
STREET ADDRESS			6.3 STRE		ł			
14. I hereby ce	ertify that the information	n supplied with this filing does not our	6.4 City	ST-ZIP	stated in Se	ection 119.07(3)(i), Florida Statutes. I furth	er certify that th	e information
indicatéd o	on this annual report or	supplemental annual report is true and	d accurate and t	nat m	v eignature	shall have the same legal effect as if mad	to under eath: th	act Lom ec

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 changed, or on an attachment with an address.

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march 1- 1990 (407)

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