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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # H90538

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| RINA RE   | EALTY INVESTMENTS, INC.   |   |  |                                  |   |   |
|---|---|---|--|----------------------------------|---|---|
| Principal Place of Business Mailing Address  ** LARRY DAVIS  2600 \$ OCEAN BLVD #10  BOCA RATON FL 33432  ** LARRY DAVIS  BOCA RATON FL 33432 |   |   |  |                                  |   |   |
|   |   |   |  |                                  | 3. Date Incorporated or Qualified 12/18/1985  | 3a. Date of Last Report<br>04/08/1996                               |
| 2. Principal Place of Business  |   | 2a. Mailing Address   |  | 4. FEI Number                    | Applied For   |   |
| Suite, Apt #, etc.  |   | Suite, Apt. #, etc.   |  | 59-2632200                       | Not Applicable  \$6.75 Additional   |   |
| 22  |   | 27  |  | 5. Certificate of Status Desired | Fee Required  |   |
| City & State  | )   | City & State  | · · · · · · · · · · · · · · · · · · ·              |                                  | 8. Election Campaign Financing  | \$5.00 May Be   |
| 23  |   | 28  | · · · · · · · · · · · · · · · · · · ·              | <del></del> ,                    | Trust Fund Contribution   | Added to Fees   |
| Zip   |   |   | Country  | ,                                | 8. This corporation has liability for i   | intangible tax under s. 199.032,                                    |
| 24  | 9. Name and Address of Current  | 29<br>t Registered Agent  | 1301   | <del></del> .                    | 10. Name and Address of New Re  |   |
| DAV   | 1S, LARRY   |   | 81   | Name                             |   | <u> </u>  |
|   | O S. OCEAN BLVD   |   | 82   | Street Addre                     | ess (P.O. Box Number is Not Acceptab  | ıle)  |
| #10   |   |   |  |                                  | oo (i.e. box italino io itali labopido  | ···   |
| BOC   | CA RATON FL 33432   |   | B3   |                                  |   |   |
|   |   |   | 84   | City                             |   | 85 Zip Code   |
| 11. Pursuant t<br>office or re<br>agent. Lar  | to the provisions of Sections 607,0502<br>egistered agent, or both, in the State<br>m familiar with, and accept the obliga  | 2 and 607.1508, Florida Statu<br>of Florida. Such change was<br>tions of, Section 607.0505, F | ites, the above<br>authorized be<br>lorida Statute | e-named corporations.            | oration submits this statement for the pon's board of directors. I hereby accept                                      | rurpose of changing its registered of the appointment as registered |
| SIGNATURE   | Signature, typed or printed name of registered agei   | nt and title if applicable. (NC   | OTE: Registered Ac                                 | eni signature require            | od when reinstating)  | DATE  |
| 12.   | OFFICERS AND  |   | 13.  |                                  | ADDITIONS/CHANGES TO OFFIC  | ERS AND DIRECTORS IN 12   |
| TITLE   | PD  | DELETE 1.1  |  |                                  |   | Change Addition   |
| NAME  | DAVIS, LARRY  |   | 1.2 NAME   | •                                |   |   |
| STREET ADDRESS  | 2600 S. OCEAN BLVD #10<br>BOCA RATON FL   |   | 1.3 STREET ADORESS                                 |                                  |   |   |
| CHTY-ST-ZIP<br>TITLE  |   |   | 1.4 CITY-<br>2.1 TITLE                             | SI-ZIP                           |   | Change Addition   |
| NAME  | DAVIS, LOIS   |   | 2.2 NAME   |                                  |   |   |
| STREET ADORESS  | 2600 S. OCEAN BLVD #10  |   | 2.3 STREET ADDRESS                                 |                                  |   |   |
| CITY-ST-ZIP   | BOCA RATON FL   |   | 2. 4 CITY-   | ST-ZiP                           |   |   |
| TITLE   | VD  | DELETE  | 3.1 TITLE  |                                  |   | Change Addition   |
| NAME  | DAVIS, JEFFERY S.<br>32000 SOLON ROAD   |   | 3.2 NAME   |                                  |   |   |
| STREET ADDRESS DITY+SI+ZIP  | SOLON OH  |   | 3.3 STREE<br>3.4. CITY                             | T ADDRESS                        |   |   |
| TITLE   | OCCUPATION OF THE PROPERTY OF | DELETE  | 4.1 TITLE  | 31-211                           |   | ☐ Change ☐ Addition   |
| NAME  |   |   | 4. 2 NAME  |                                  |   | -   |
| STREET ADDRESS  |   |   | 4.3 STREE  | F ADDRESS                        |   |   |
| CITY - \$1 - 71P  | 1   |   | 4.4 C/TY-  | ST-ZIP                           |   |   |
| TITLE   |   | ☐ DELETE  | 5.1 TITLE  |                                  | 0.50  | Change Addition   |
| NAME<br>DEVICE CONSISTS   |   |   | 5.2 NAME   | T 4000000                        |   | '   |
| STREET ADDRESS  |   |   | 5.3 STREE<br>5.4 CITY -                            | T ADDRESS                        |   |   |
| City+St-ZiP<br>Title  |   | DELETE  | 6.1 TITLE  | DI-TIL                           | · · · · · · · · · · · · · · · · · · ·   | Change Addition   |
| NAME  |   |   | 6.2 NAME   |                                  |   |   |
| STREET ADDRESS  |   |   | 6.3 STREE  | T ADDRESS                        |   |   |
| CITY-ST-ZIP   |   |   | 6.4 CITY-  |                                  |   |   |
| informatio  | n indicated on this annual report or s  | upplemental annual report is<br>the receiver or trustee empo                                  | true and acc                                       | urate and that                   | in Section 119.07(3)(i), Florida Statute my signature shall have the same legal as required by Chapter 607, Florida S | al effect as if made under oath; that                               |