## 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

DOCUMENT # H92715

(2)

RETAIL MAIL, INC.

**FILED** 

Apr 30 1997 8:00am

Secretary of State

Principal Place	e of Business	Mailing Address							
% DAVID E. JOHNSON 1355 BROOKSIDE DRIVE VENICE FL 34292		% DAVID E. JOHNSON 1355 BROOKSIDE DRIVE VENICE FL 34282-1402	1355 BROOKSIDE DRIVE						
						3. Date Incorporated or Qualified 01/03/1986	3a. Date o		eport
<del></del>	lace of Business	2a. Mailing Address	<u> </u>			4. FEI Number	Applied For		
Sulte, Apt.	# 010	Suite, Apt. #, etc.				59-2619467   Not Applicable   S8.75 Additional			
22 Soile, Apr.	W, BIC.	<del>                                     </del>	27			5. Certificate of Status Desired		<b>6./5</b> A Fee Re	
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be			
23	·	28	28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Country			8. This corporation has liability for in			199.032,
24	25	29	30			Florida Statutes Yes No  10. Name and Address of New Registered Agent			
IAU	9. Name and Address of Curre	ent Hegistered Agent		81	Name	10. Name and Address of New Heg	istered Age	nt	
	NSON, DAVID E. 5 BROOKSIDE DRIVE								
	ICE FL 33595					Street Address (P.O. Box Number is Not Acceptable)			
7611	IOT I C 00000			83					· ·-·
				-	<u> </u>			-111	
				84	City		FL	5 Zip C	lode
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obti	le of Florida. Such change was a	authorize	d by	the corporati	oration submits this statement for the pu on's board of directors. I hereby accep-	rpose of cha the appoint	anging its ment as	registered registered
SIGNATURE	Signature, typed or pointed name of registered a	(NOV	- Francisco			ad when relestating)			
12.		ND DIRECTORS	13.	a Agei	ni signature require	ADDITIONS/CHANGES TO OFFICE	DATE RS AND DI	RECTORS	S IN 12
TITLE	PD	DELETE	1111	HLE			<u></u>	Change	Addition
NAME	JOHNSON, DAVID E.			AME					
STREET ADDRESS			1.8 S	1.3 STREET ADDRESS					
CITY-ST-ZIP	VENICE FL		14 CITY		r-ZIP				
TITLE	D CANDON CANDON C	☐ DELETE						Change	Addition
NAME	JOHNSON, SANDRA C. 1355 BROOKSIDE DR		551						
STREET ADDRESS	VENICE FL			STREET ADDRESS					
CITY-ST-ZIP TITLE	APHOL 1 F	DELETE	DELETE 31T		1 - 7/P	<del>.</del>	<del>`</del>	Change	Addition
NAME		F 0000	3.2 N				LuuJ	ALIM IN	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY-S	1				
TITLE		☐ DELETE	4.1 TI					Change	Addition
NAME			4.2 N	IAME					
STREET ADDRESS			438	TREFT	ADDRESS				
CITY-ST-ZIP				1Y-S1	1 - ZIP		····		
TITLE		☐ DELETE	5111					Change	Addition
NAME			5.2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		DELETE		HY-SI	1 - ZIP			Change	Artelian
TITLE		□ vacat	6.1 TI				Ц	Change	☐ Addition
NAME CENTEE ADDRESS			6.2 N		ADDRESS				
STREET ADDRESS			6.3 S	1 HOE E C	ADDRESS				

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 sorporation 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 attact here with an address.