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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

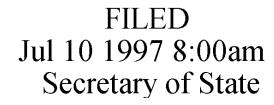
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J06883

6883 (9)

R.E.T., INC.



| Principal Place of Business % REUBEN E. THOMPSON. JR. 15132 82ND TERR N. | Mailing Address * REUBEN E. THOMPSON. JR. 15132 82ND TERR N. | | 1 1002:310 8434 90310 01101 18383 (8208 411 | J MIÑIN OTORS OI | #14 WIWH KIWH | #384 1 09 | | | |
|--|--|--------------------------|---|------------------------------|---|-----------------------------|---------------------------|----------------------------|--|
| LAKE PARK FL 33418 LAKE PARK FL 33 | | | | | 3. Date Incorporated or Qualified | | | | |
| 2. Principal Place of Business | Principal Place of Business 2a, Mailing Address | | | | 4. FEI Number | 00/0 | | oplied For | |
| 21 | 26 | | | | 59-2659426 | | | ot Applicable | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | | | | | Additional | |
| 22 | 27 | | | | 5. Certificate of Status Desired | | | perlupe | |
| City & State | City & State | | | | Election Campaign Financing Trust Fund Contribution | | \$5.00 | May Be to Fees | |
| Zip Country | Zip Country | | | | | | | | |
| 24 25 | | 30 | | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | | | | |
| 9. Name and Address of Current I | | | | | 10. Name and Address of New Re | | | | |
| THOMPSON, REUBEN E., JR. | | | | 81 Name | | | | | |
| 15132 82ND TERRACE N. LAKE PARK FL 33418 | | | B2 Street Add | | ss (P.O. Box Number is Not Accepta | ple) | | | |
| | | | 83 | | | | | | |
| | | ļ | 84 | City | | | 0E 7.0 | Code | |
| | | | | Ť | | FL | | | |
| 11. Pursuant to the provisions of Sections 607.0502 office or registered agent, or both, in the State of | and 607.1508, Florida Statute Florida, Such change was a | es, the at authorized | ove-r | named corpo he corporatio | ration submits this statement for the parties board of directors. I hereby acce | ourpose of e pt the appo | changing it intment as | s registered registered | |
| agent. I am familiar with, and accept the obligation | ons of, Section 607.0505, Fig | rida Stat | utes. | | | | | | |
| Signature, typed or printed name of registered agent of | | | 1 Agent | signature required | when reinstaling) | DATE | | | |
| 12. OFFICERS AND | | 13. | | | ADDITIONS/CHANGES TO OFFICE | | | | |
| TITLE D NAME THOMPSON, REUBEN E., JR. | DELETE 1.1 TO | | | | | L | Change | ☐ Addition | |
| ARAMA MANIN PERRAPE NI | 1.2 N | | _ | | | | | | |
| STREET ADDRESS 10132 82ND 1EMRACE N. OITY-ST-ZIP LAKE PARK FL | | 1.3 STREE 1.4 CITY- | | | | | | 1 | |
| TITLE DST | ☐ DELETE | 2.1 117 | | ZIP | | T | Change | Addition | |
| NAME THOMPSON, JEWEL ELAINE | | 2.2 NA | | | | _ | | | |
| STREET ADDRESS 15132 82ND TERRACE N. | | 2.3 ST | REET AL | ODRESS | | | | | |
| CITY-ST-ZIP LAKE PARK FL | | 2. 4 CITY- | | | | | | | |
| TITLE | DELETE | 3.1 TITLE | | | | | Change | Addition | |
| NAME | | 3.2 NA | ME | | | | | | |
| STREET ADDRESS | | 3.3 ST | 3.3 STREET ADDRE | | | | | | |
| CITY-ST-ZIP | | 3.4. C | TY-ST- | ZIP | | | | | |
| TITLE | ☐ DELETE | 4.1 717 | LΕ | | | ι | Change | ☐ Addition | |
| NAME . | | | 4. 2 NAME | | | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | | | |
| City-st-ziP | DELETE | _ | 4.4 CITY-ST-ZIP | | | | Change | Addition | |
| TITLE | L_J DELETE | | 5.1 TITLE 5.2 NAME | | | ι | change | ☐ Addition | |
| NAME STREET ADDRESS | | | ime Reet ac | DDECC | | | | | |
| CITY-ST-ZP | | | | | | | | | |
| TITLE | DELETE | 6.1 111 | TY-ST- ILE | 217 | | | Change | Addition | |
| NAME | | 6.2 NA | | | | • | | | |
| STREET ADDRESS | | | REET AC | DORESS | | | | | |
| CITY-ST-ZIP | | ı | IY-SI- | l | | | | | |

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.

ppears in Block 12 or Block 13 if changed, or on an attachment with an address.