**FILED** 

Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90038 021 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **J23805**

RENEX H	HOMES, INC.						l
Principal Place	of Rusiness	Mailing Address				I (BB)(ii) Build hindle hind hibhis Balan alsh anash alahi asahi bersi anahi asahi l	T)
10503 SAN JOS		10503 SAN JOSE BLVD					
JACKSONVILLE FL 32257		#17					
US		JACKSONVILLE FL 32257				DO NOT WRITE IN THIS SPACE	
		US				3. Date Incorporated or Qualifed	}
						07/08/1986 4. FEI Number Applied For	
2. Principal Pl	ace of Business	2a. Mailing Address					10
21		26				59-2699605 Not Applicate \$8.75 Additional	016
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required	1
22 City & State		City & State				6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	}
Zip	Country	Zip	Col	intry		8. This corporation owes the current year Intangible	
24	25 29 3		30	_		Personal Property Tax.	
	9. Name and Address of Current	Registered Agent		Ц,	•	10. Name and Address of New Registered Agent	
5.55	TIE DENE ID			81	Name	•	
	TIE, RENE, JR.			82	Street Add	Address (P.O. Box Number is Not Acceptable)	
	3 SAN JOSÉ BLVD						
JACI	KSONVILLE FL 32257			83			
				84	City	85 Zip Code	
						FL <sup>80</sup> <sup>24</sup> <sup>266</sup>	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligati	of Florida, Such change was a	штпопие	ו עם נ	e-named col the corpora	rporation submits this statement for the purpose of changing its registere- tion's board of directors. I hereby accept the appointment as registered	
SIGNATURE		(1)	- B1		• -:•·	sired when reinstating) DATE .	_ ا
12.	Signature, typed or printed name of registered agent OFFICERS ANI	<u>''</u>	13.	a vilen	t signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	.   {
TITLE	DP STREETS ALL	DELETE	1.1 T	TLE.		☐ Change ☐ Add	
NAME	DOSTIE, RENE, JR.		1.2 N	AME			[ ]
STREET ADDRESS	10503 SAN JOSE BLVD				ADDRESS		}
CITY-ST-ZIP	JACKSONVILLE FL		1	1,4 CITY-ST-ZIP			1 6
TITLE			2.1 T			☐ Change ☐ Add	ition
NAME			2.2 N	AME		•	Ì
STREET ADORESS	10503 SAN JOSE BLVD		2.3 \$	TREET	ADDRESS		
CITY ST ZIP	-JACKSONVILLE FL-			YTY'S	- 1		
TITLE	DST	☐ DELETE	3.1 T	ITLE		☐ Change ☐ Add	ition
NAME	DOSTIE, RICHARD R.		3.2 N	AME			
STREET ADDRESS	10503 SAN JOSE BLVD		3.3 S	TREET	ADDRESS		- {
CITY-ST-ZIP	JACKSONVILLE FL		3.4. 0	CITY-S	T-ZIP		
TITLE	DVP	☐ DELETE	4.1 T	ITLE		☐ Change ☐ Add	lition
NAME	DOSTIE, DAVID O.		4.21	AME	1		1
STREET ADDRESS	10503 SAN JOSE BLVD		4.3 8	TREET	ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		4.4 0	TY-ST	r-ZIP	<u> </u>	
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NAME	[2]的最高,自己是一个	<b>在1997年</b>	621	IAME :			
STREET ADDRESS	1		6.3 9	TREET	ADDRESS	·	

th this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is finally enough the same legal effect as if made under oath; that I am an other of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in other with an address, with all other like empowered. 14. I hereby certify that the information supplied indicated on this annual report or supplemental officer or director of the corporation or the record Block 12 or Block 13 if changed, or open attack.

6.4 CITY-ST-ZIP

SIGNATURÍ