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

PROFIT CORPORATION ANNUAL REPORT

1997

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 15 1997 8:00am

Secretary of State

Change Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J73066

(9)

RSKE	ENTERPRISES, INC.						Didii Bibli bil	?!! 0 10111001	
Principal Place of Business 2220 COLUMBIA FT LAUDERDALE FL 33326		Mailing Address 2220 COLUMBIA FT LAUDERDALE FL 33326-2318							
US		US	420 2010		3. Date Incorporated or Qualifit 05/13/1987	ed 3a. D	ale of Last 01/1996	Report	1
2. Principal Place of Business		2a. Mailing Address		4. FEI Number			Applied For	-	
21		26			59-2805756 Not Applicable			,	
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Additional	
City & State		City & State					· · · · · · · · · · · · · · · · · · ·	Required	4
23		28		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees			
Zip	Country	Zip	Countr	v	8. This corporation has liability	for intensible			-
24	25	29	30	•	Florida Statutes		No No	5. 199.032,	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New	Registered	Agent		
	JPT, ROBERT S.		B1	l Namo	•				1
	50 VISTA ISLES DR #922		82 Street Add		dress (P.O. Box Number is Not Accer	otable)			\dashv
SUM	NRISE FL 33325		L					· _ ·····	
			83	3					
			84 City			-	85 Z(p	Code	-
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stal	tutes, the above	/e-named cor	rporation submits this statement for ti ation's board of directors. I hereby ac	ne purpose o	f changing	its registered	-
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Statute	ss.	ation's board of directors, I hereby ac	cept the app	ooiniment a	s registered	
SIGNATURE									
12.	Signature, typed or printed name of registered a OFFICERS A	DESCRIPTION (NO DIRECTORS)	ICITE: Registered Ar	jent signaturo requ	uirod when reinstating) ADDITIONS/CHANGES TO OF	DATE	DIRECTO	DC IN 12	ي: ا
TITLE	PIS	DELETE	1.1 TOLE		ADDITIONS/OFFANGES TO G	LICENS AND	Change		96/6
NAME	KLUPT, ROBERT S.		1.2 NAME						2
STREET ADDRESS	2220 COLUMBIA			.1 ADDRESS					S
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CHY -	S1-7IP					12
TITLE	D	DELETE	2.1 TITLE				Change	Addition	
NAME	KLUPT, ROBERT S.		2.2 NAME						
STREET ADDRESS	2220 COLUMBIA		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY	-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP TITLE		DELETE	3.4. CHTY-	S1-7IP			Change	- Carre	
NAME		□ sercit	4.1 TITUE 4.2 NAME				Change	Addition	
STREET ADDRESS				I ADDRESS					
CITY-ST-ZIP			4 4 CITY-						
TITLE		DELETE	51 1IILE	OI , (Hr.			Change	Addition	-
NAME		—	5 2 NAME						
STREET ADDRESS				1 ADDRESS					
CITY-ST-ZIP			5.4 CHY-						

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 of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation in the receiver or truellic employed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed for or an attachment with anyage section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further 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 of supplied with the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated in Section 119 07(3)(i), Florida Statutes in Section 119 07(3)(i), Florida Statutes in Section 119 07(3)(i), Florida Statut

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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