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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 12 1997 8:00am

Secretary of State

2/6/97 (941)921-4636

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K56711

(0)

RITE ON TOP, INC.

I													
Principal P	lace of Business		M	Mailing Address					{	AF BIBLI DIBLI D	J iğil elbil gib ii		
	NEY POINT ROAD			2750 STICKNEY POINT ROAD									
SUITE 201	EI 24921			uite 201 Arasota fl 34231-808	20								
SARASOTA FL 34231				SANASCIA FL SESTOUR				3. Date Incorporated or Qualified 01/09/1989		ate of Last R 23/1996	Report		
2. Principal Place of Business				2a. Mailing Address					4. FEI Number	0//		pplied For	
21				26					65-0175139		} 	ot Applicable	
Suite, Apt #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional	
22				27					6. Celtilicate di Status Desirou		····	equired	
City & State				City & State					6. Election Campaign Financing	r-1		May Be	
23 Zip				Zip Country					Trust Fund Contribution	r intercible		to Fees	
24	25		29				· · · · · · · · · · · · · · · · · · ·		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
		Address of Currer						10. Name and Address of New Registered Agent					
S	MITH, KENNETH D					81	Name)	"''' ''' '' ''' ''' ''' ''' '''				
	750 STICKNEY POI						Street	Addres	dress (P.O. Box Number is Not Acceptable)				
\$.	ARASOTA FL 3423	1											
ı						83							
ŀ						84	City		<u> </u>	FL	85 Zip	Code	
11. Pyrsua	ant to the provisions of	1 Sections 607.050	J2 and 6	07.1508, Florida Stati	ites, the r	above	e-name	d corpor	ration submits this statement for the		changing in	ts registered	
office of agent.	11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATUR	Stonature typed or prints	ed name of registered age	∍rl ano tite	elf aobt-cable. (NC	17E: Register	ad Abe	ant signatu	ne required	5 when reinstating)	DATE	<u></u>		
12.	OFFICERS AND						111 P.H	B 1040	ADDITIONS/CHANGES TO OFFI		DIRECTOR	RS IN 12	
TITLE	D		***************************************	DELETE	1.1 1	TITLE		T	· · · · · · · · · · · · · · · · · · ·	- <u>T.ii.</u>	☐ Change	Addition	
NAME	SMITH, KENNE				1.21	NAME							
STREET ADDRES					1,3 5	STREET	ADORESS						
CITY-ST-ZIP	SARASOTA FL			05,575		CITY-S	iT- 2 IP	↓			<u> </u>		
TITLE	D DOLLAR MALL	**** A ID		DELETE		TITLE					Change	Addition	
NAME	DOLLAR, WILL				H	NAME							
STREET ADDRES	SS 2750 STICKNE SARASOTA FL						ADDRESS						
CITY-ST-ZIP TITLE	D SAKASUTA FL	<u> </u>		DELETE		CITY - S	ST-ZIP	┼		450	☐ Change	Addition	
NAME	DOOLEY, WILL	IAM R		L_J DELETE		NAME					LICHANGE	L.J Aguituri	
STREET ADDRES							ADDRESS						
CITY-ST-ZIP	SARASOTA FL					CITY-S			•			İ	
TITLE	9185100111	<u></u>		DELETE		TITLE)1-EN	 			☐ Change	Addition	
NAME						NAME							
STREET ADDRES	ss				4.3 5	STREET	ADDRESS						
CITY - ST - ZIP					440	CITY-S	T-ZIP	<u> </u>					
TITLE				DELETE	5.1 7	TITLE					☐ Change	Addition	
NAME					521	NAME			•				
STREET ADDRES	SS				535	STREET	ADDRESS						
CITY - ST - ZIP				Therese		CITY - S	7-21P	↓			**************************************		
TITLE				DELETE	1	TITLE					∟ Change	Addition	
NAME				1		NAME							
STREET ADDRES	SS	_	\sim		1		address						
14. Ldo be	ereby certify that the in	nation supplie	Lwish	oix filing does not que		CITY-S		stated in	n Section 119.07(3)(i), Florida Statuti	as I further	cortifu that	tha	
informa	ation indicated on this	Arriual report or s	Supplement	fental annual report is:	true and	accu	urate ani	d that m	ny signature shall have the same leg	ial effect as	s if made un	ider oath: that l	

AME OF SIGNING OFFICER OR DIRECTOR