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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthami Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

K69184

(5)

| 11 Co.poration | | | | | 1 | | | |
|--|--|-------------------------------|---|-------------|--|---------------------------------|--------------------|----------------|
| R.D. I | MORGAN, INC. | | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | | |
| 631 SE 56 AVE POMPANO BCH FL 33060 TYPE ** RICHARD F. BRUMBA 631 SE 6TH AVE | | | | | | | | |
| US | ERKOR | POMPANO BOH FL | 33060 | | 3. Date Incorporated or Qualified | 3a. Dat | e of Last F | Report |
| | | | | | 02/24/1989 | | 08/01/1 | 995 |
| | ace of Business | 2a. Marling Address | | | 4. FEI Number | | | Applied For |
| 631 | SE 6 AVE | 26 | | | 65-0145218 | | | Not Applicable |
| Suite, Apt | #, etc. | Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | d S8.75 Additional Fee Required | | |
| City & State | 9 | City & State | *************************************** | •• | 6. Election Campaign Financing | | \$5.0 | 00 May Be |
| 3 | | 28 | | | Trust Fund Contribution | | • | ed to Fees |
| Zφ | Country | Zφ | Countr |) | 8. This corporation has liability for | | tax under s | 199.032, |
| 4 | 25 | 29 | 30 | | Florida Statutes Yes No | | | |
| | g. Name and Address of Curren | t Registered Agent | | - r | 10. Name and Address of New | Registered | Agent | |
| | | | 61 | Name | | | | |
| BRUMBAUGH, RICHARD F. | | | 82 | 2 Street Ac | et Address (P.O. Box Number is Not Acceptable) | | | |
| | SOUTHWEST 29TH TERRACE | | | | | | | |
| FORT | LAUDERDALE FL 33312 | | 83 | 3 | | | | |
| | | | 84 | 4 City | | | 85 Z | Zip Code |
| | | | __ | | poration submits this statement for the property of directors. Thereby accept the ap | FL | - | |
| familiar w SIGNATURE: _ | th, and accept the obligations of, Sections of Section | on 607.0505, Florida Statutes | 3. | | ાલા દેશ એ છે. (જ્યારો ગોલ્યું) | DANÉ | | |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO OF | FICERS AN | | |
| TITLE | PTD | ☐ DELETE | 1 1 T:TLE | | | | ☐ Change | Addition |
| NAME | MORGAN, ROGER DALE | | 1.2 NAME | | | | | |
| STREET ADDRESS | 631 SE 6TH AVE | | 13 STREI | FF ADDRESS | | | _* = | |
| CHTY ST-ZIP | POMPANO BCH FL | FINCER | 140/11 | | <u>'ADD</u> | | | MAddit on |
| TITLE | VSD DELETE | | 2 1 17716 | | <u>\$100000182776659</u> -05/17/960 024 9-0 0 4ddton ****200,00 ****200,00 | | | |
| NAME | BRUMBAUGH, RICHARD F. | = | 2.2 NAME | i | काक का क <u>८</u> | աս. սա | <i>म्हानः स्</i> र | 200.00 |
| STREET ADDRESS | 1400A S.W. 29TH TERRACE | : | | ET ADDRESS | | | | |
| CITY - ST - ZIP | FORT LAUDERDALE FL | DELETE | 24 Gil V - 3 - 1 Tulius | | | | Change | Addition |
| TITLE | | | 3 1 0100 3 2 NAME | | | | La Sila ige | L) Madeign |
| NAME | GIBBS, ELLEN MILLS | | 4 | ET ADDRESS | | | | |
| STREET ADDRESS | 224 S.E. 9TH STREET FORT LAUDERDALE FL | | 3.3 STHE 3.4 CITY | | | | | |
| CITY-ST-ZIP TITLE | FORT DAUDERDALE PL | DELETE | 4 1 11118 | | | | Change | Addition |
| NAME | | | 4.2 NAME | | | | | |
| STREET ADDRESS | | | | ET ADORESS | | | | |
| CITY-ST-ZIP | | | 4.4 CITY | 1 | | | | |
| TITLE | | DELETE | 5 1 Tift! | | | | Change | : Addition |
| NAME | | | 5.2 NAM5 | | | | | - |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY | | | | | |
| TITLE | + | DELETE | 6 1 I ILI | | | | ☐ Change | Addition |
| NAME. | | _ | 6.2 NAMI | - 1 | | | | |
| STREET ADDRESS | | | | ET ADDRESS | | | | |
| | | | 0.0001116 | | | | | |

64 CITY - S - 7:P

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report is true and arcurate 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.

5-1-96 954-786-1775