## 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

## Feb 27, 1999 8:00 am Secretary of State

02-27-1999 90044 001 \*\*\*150.00

## DOCUMENT # **K87728**

1. Corporation Name

RINEL CORP.

Principal Place of Business	Mailing Address		1 18618411 661 18611 18611 18614 1867 1861 1861	
% DANIEL W. NELSON 5070 NORTH ATA: SUITE 205 VERO-BEACH FL 32963	% Daniel W. Nelson 5070 North Ata: 5UTE-205 -Vero- <del>Beach Fl 32983</del>		DO NOT WRITE IN THIS S	PACE
			3. Date Incorporated or Qualifed 05/12/1989	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
27 880 Oyster She	ellLane 26 P.D.BDX.	3432	65-0123194	Not Applicat
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State  23 VC50 Reach F16	City & State	Florida	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country  24 329 62 7 25		ountry	8. This corporation owes the current year Intan	gible ⊇Yes □No
	f Current Registered Agent		10. Name and Address of New Registered Ag	jent
NELSON, DANIEL W.		81 Name 82 Street Addres	ss (P.O. Box Number is Not Acceptable)	18/
5070 NORTH A1A-		83	Cysia Shair Ra	
VERO BEACH-FL-32963-8216		84 City Vers	2 Beach FL	85 Zip Code 32 962
11. Pursuant to the provisions of Sections office or registered agent, or both, in the	607.0502 and 607.1508, Florida Statutes, the State of Florida. Such change was authorize	above-named corporation	ration submits this statement for the purpose of ch i's board of directors. I hereby accept the appointr	langing its registered nent as registered

	Signature, typed or printed name of registered agent and title	r applicable. (NOTE: R	egistered Agent signature require			
12.	OFFICERS AND DIRECTORS			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	☐ Change	Addition	
NAME	NELSON, DANIEL W.		1.2 NAME			
STREET ADDRESS	#205 5070 NORTH A1A		1.3 STREET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL		1.4 CITY-ST-ZIP			
TITLE	DVST	☐ DELETE	2.1 TITLE	Change	Addition	
NAME	riley, H. <b>Wade II</b> I		2.2 NAME			
STREET ADDRESS	8049 MONETARY DR #D4		2.3 STREET ADDRESS			
CITY-ST-ZIP	RIVIERA BEACH FL		2.4 CFTY-\$T-ZIP			
TITLE	D	☐ DELETE	31 TITLE	☐ Change	☐ Addition	
NAME	RILEY, JANET FIELD		3.2 NAME		į	
STREET ADDRESS	5070 NORTH A1A #205		3.3 STREET ADDRESS			
CITY-ST-ZIP	VERO BEACH FL		3.4. C/TY-ST-Z/P			
TITLE	D	☐ DELETE	4.1 TITLE	☐ Change	Addition	
NAME	HOGAN, JEP		4. 2 NAME			
STREET ADDRESS	20 ABINGTON COURT		4.3 STREET ADDRESS			
CITY-ST-ZIP	ATLANTA GA		4.4 CITY-ST-ZiP			
TITLE		☐ DELETE	5.1 TITLE	Change	Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		1	
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE	☐ Change	Addition	
NAME			6.2 NAME		ļ	

14. I 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**SIGNATURE:** 

STREET ADDRESS

Applied For Not Applicable