FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00									
PROFIT CORPORATION ANNUAL REPORT			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State						
	1996		DIVISION OF	CORPORA	ATIONS				
DOCUMENT # K88029 1. Corporation Name			(9)						
REINANTE CORPORATION									
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Principal Place	of Business		Mailing Address				+ 10-1-10-11		
7610 SW 61 ST AVE MIAMI FL 33143 US			7610 SW 61ST AVE Miami FL 33143 US						
							3. Date Incorporated or Qualified 05/15/1989	3a. Date of La 04/25	
2. Principal Pla	ace of Business	26	ta. Malfing Address				4. FEI Number 65-0186856		Applied For Not Applicable
Suite, Apt. #	Y, etc.	2:	Suite, Apt. #, etc.				5. Certificate of Status Desired		3.75 Additional Fee Required
City & State		28	City & State				Election Campaign Financing Trust Fund Contribution	5	5.00 May Be
Zip 24	25 Cou	29		30 Cou	ntry			es 🔼 No	
	9. Name and Add	dress of Current Reg	istered Agent		81 Name		10. Name and Address of New	Registered Agen	t
ASARNOW, CHARLES Dudley_Thomas Street Address (P.O. Box Number is Not Acceptable)									
1600 NW 159 ST							Manor Lane		
.MIAMI F	ے L 33169	Sun	to Vilinite		83				
1	_		\supset	·	84 City Md	Lami			Zip Code 33143
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.									
	h, and accept the obl	igations of Section 60		,			and approximately decorpt and approximately	pone nom as region	torou agone rean
	Signature, typed or printed na		NOT	E: Registerco	Agent signature i	requireo w	hen reinstating!	DATE	
12.		OFFICERS AND DIR	ECTORS Q DELETE	13.		1	ADDITIONS/CHANGES TO OF		
NAME {	P ASARNOW, CHARLES		(X) Deterie	ELETE 1.1 TITLE 1.2 NAME		P.		∑ Cha	inge 🔲 Addition
STREET ADDRESS	1600 NW 159 ST					homas, Dudley			
CITY- ST-ZIP	MIAMI FL				0.		8 Manor Lane		
TOTLE	TSD		™ DELETE	2. 1 T(☐ Cha	inge 🔲 Addition
NAME	HONIBALL, PE			2.2 NA	ME				
STREET ADDRESS	7610 SW 61ST	AVENUE			REET ADDRESS				
CITY-ST-ZIP TITLE	MIAMI FL	· · · · · · · · · · · · · · · · · · ·	DELETE	2.4 CH 3.1 TH	Y-ST-ZP			Cha	inge
NAME				3 2 NA				ال ال	Ingo Addition
STREET ADDRESS				3 3. \$T	REET ADDRESS				
CITY-ST-ZIP				3 4 CIT	Y-SI-ZIP	ļ			
TITLE			DEFELE	4 1 111				Cha	nge 🔲 Addition
NAME				4.2 NA					
STREET ADDRESS CITY-ST-ZIP					REET ADDRESS		~UUUUU18	1,141a	-
TITLE			DELETE	4.4 CH 5. 1 TH	Y-\$T-ZIP LE	 	2000018 -05/07/9601 ****200.00	U39U2Z □ Cha	nge [1] Addition
NAME				5.2 NA			***************************************		g
STREET ADDRESS					REET ADDRESS				\sim /
CITY - ST - ZIP		·····	** ** ** ** ** ** ** ** ** ** ** ** **	5.4 CI)	Y - \$T - ZIP	<u></u>		1	16
TITLE			☐ DELETE	6 1 117				(₽%	nge Addition
NAME eteret andrese				6.2 NAI				J 12	2
STREET ADDRESS				■ 63SIF	REET ADDRESS	I		17	\

14. I do 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 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 challed. Or on an attachment with an address.

SIGNATURE:

Budley Thomas

Dudley Thomas

Dudley Thomas

Date

April 30, 1996 (305) 284–1300

Chapter 6 or Typed-OB PRINTED NAME OF SIGNING OFFICER OR DIRECTOR