

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

FILED
Mar 16 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L01990
 1. Corporation Name
RUTA INC.

Principal Place of Business <u>5890 RODMAN ST</u> <u>HOLLYWOOD, FLORIDA</u> <u>33023</u>	Mailing Address <u>5890 RODMAN ST</u> <u>HOLLYWOOD, FL 33023</u>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>5890 RODMAN ST.</u> Suite, Apt. #, etc.	2a. Mailing Address 26 <u>5890 RODMAN ST</u> Suite, Apt. #, etc.
22. City & State 23 <u>HOLLYWOOD FLORIDA</u>	27. City & State 28 <u>HOLLYWOOD, FLORIDA</u>
24. Zip <u>33023</u> Country <u>USA</u>	29. Zip <u>33023</u> Country <u>USA</u>

3. Date Incorporated or Qualified <u>7/14/89</u>	4. FEI Number <u>65-0165683</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent
ELIAS TACHER
88-97 COLLINS AVENUE
APT 7001
SURESIDE, FLORIDA 33154

10. Name and Address of New Registered Agent
81 Name Robert J. Siedlecki
82 Street Address (P.O. Box Number is Not Acceptable)
5890 RODMAN STREET
83 _____
84 City HOLLYWOOD **FL** **85** Zip Code 33023

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.

SIGNATURE Robert J Siedlecki Pres 3/9/98
(Signature of individual named in registered report and fee applicator) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE <u>PRESIDENT</u>	<input checked="" type="checkbox"/> DELETE
NAME <u>TACHER ELIAS</u>	
STREET ADDRESS <u>10101 COLLINS AVE. SUITE 11F</u>	
CITY-ST-ZIP <u>BAL HARBOUR, FL</u>	
TITLE <u>S</u>	<input checked="" type="checkbox"/> DELETE
NAME <u>TACHER PERLA</u>	
STREET ADDRESS <u>10101 COLLINS AVE. STE 11F</u>	
CITY-ST-ZIP <u>BAL HARBOUR, FL</u>	
TITLE <u>TACHER, DAVID</u>	<input checked="" type="checkbox"/> DELETE
NAME	
STREET ADDRESS <u>10101 COLLINS AVE. SUITE 11F</u>	
CITY-ST-ZIP <u>BAL HARBOUR FL</u>	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <u>P/STTD</u>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME <u>ROBERT J SIEDECKI</u>	
1.3 STREET ADDRESS <u>5890 RODMAN ST</u>	
1.4 CITY-ST-ZIP <u>HOLLYWOOD, FL 33023</u>	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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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.

SIGNATURE: Robert J Siedlecki Pres 3/9/98 305-621-0389
(Signature and typed or printed name of signing officer or director)

CR2E034 (10/97)