## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

L10592

(8)

DOCUMENT # 1. Corporation Name

RAND INVESTMENTS, INC.

100 miles (100 miles (		
		<b>  </b>

Principal Place of	of Business	Mailing Address						
413 FLAGLER STREET TALLAHASSEE FL 32301			413 FLAGLER STREET TALLAHASSEE FL 32301					
IALLAMASS	DEE PL 32301	(ALLAMASSE)	E FL 32301		3. Date Incorporated or Qualified	3a. Date of Las	st Report	
					08/22/1989		3/1995	
2. Principal Plac	ce of Business	2a. Mailing Addres	;S		4. FEI Number		Applied For	
21		26			59-2965730		Not Applicable	
Suite, Apt. #	, etc	Suite, Apt. #, 6	etc.		5. Certificate of Status Desired	1 1 7 -	.75 Additional	
22		Ctu 8 State			6. Election Campaign Financing		ee Required	
City & State		City & State	City & State		Trust Fund Contribution	\$5.00 May Be Added to Fees		
<i>Z</i> ip	Country	7(0)	Count		8. This corporation has liability for i	ntangible tax unde	ers 199.032,	
24	25	29	30		Florida Statutes 🔲 Yes	□ No		
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New R	egistered Agent		
			8	1 Name				
	er, Henry		8	2 Street Add	ress (P.O. Box Number is Not Acceptab	le)		
413 FLAGLER ST.			8	<u> </u>				
TALLA	HASSEE FL 32301		0	3				
			8	4 City		FL 85	Zip Code	
44 Diversions to	the provisions of Sections 607 050	2 and 607 1508 Florida	Statutes the above	named coroo	valion submits this statement for the pur	noee of changing	its registered office	
or redistere	ed agent, or both, in the State of Flor	ida. Such change was a	uthorized by the co	poration's bod	and of directors. Thereby accept the appoint	pintment as regist	ered agent. I am	
	h, and accept the obligations of Sec	. /	tatutes.			5/3/01		
SIGNATURE _	Signature, type of pontal infection of registered ages	# CV stand (for it act it able)	(NOTE Registered A	jent signat nemerjore	ed where zerostating			
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF			
THILE	D	☐ DELE	[E 1 1 11]L	f		Cha	nge 🔲 Addition	
NAME	WEAVER, HENRY		1.2 NAM	F				
STREET ADDRESS	413 FLAGLER STREET		1.3 STRE	ET ADDRESS				
CITY - S1 - ZIP	TALLAHASSEE FL			- ST - ZIP		☐ Cha	nge	
TITLE		DELE					inge E Addition	
NAME			2.2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP		DELF		-S1-ZIP		- Cha	nge Addition	
TITLE NAME		_ Otto	3.2 NAM	_		_	-	
STREET ADDRESS				EET ADDRESS				
CHTY - ST - ZIP			3.4 CiTY	-ST-ZIP	10000182	20871		
TITLE		☐ DELE			10000182 -05/14/96011	000 <b>2</b> 20%	nge 🔲 Addition	
NAME			4.2 NAM	iE .	***200.00			
STREET ADORESS			4 3 STR	FET ADDRESS				
CITY-ST-ZIP		b		-ST-ZIP				
TIFLE		☐ DELE	TE 5.1 Total	.F		☐ Cha	inge 🔲 Addition	
NAME			5 2 NAN					
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP		Class s		r-S!-ZIP		Cha	inge   Addition	
THILE		☐ DECE				பு	rige [_] Aud doi!	
NAME			6 2 NAM					
STREET ALORESS				EET ADDRESS		E-1-0	i 6 000	
CITY-ST-ZIP	ortily that the information surreluce	t with this filtren is valuate	rily furnished and d	r S1-2if oes not qualify	for the exemption stated in Section 119	.07(3)(k), Florida S	Statutes I further	
certify that oat it that	t the information indicated on this are	nual report or supplemer poration or the receiver o	ntal annual report is ir trustee empowere	true and accur	rate and that my signature shall have the his report as required by Chapter 607, F	: same ledal eriec	, as ir made under	

SIGNATURE: HEINRY WEAVER SIGNING OFFICER OF BRECKER AND THE OFFICER OF BRECKER OF BRECKER

904-942-7781