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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 DOCUMENT #

1. Corporation Name

}	rucking, inc.				-	_				
Principal Place o	of Business	M	aiting Address							
2692 N. UNIVERSITY DRIVE SUITE 10-A SUMRISE FL 33322			2692 N. UNIVERSITY DRIVE SUITE 10-A SUNRISE FL 33322				I a - Day	of Last Re		
:							3. Date Incorporated or Qualified 12/07/1989		4/25/199	
2. Principal Plac	ne of Business	2a	Mailing Address				4. FE) Number	_L	A	pplied For
1		26	_				65-0160411			ot Applicable
Suite, Apt. #,	, etc.	27	Suite, Apt. #, etc				5. Gertificate of Status Desired			Additional equired
City & State		28	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zipi	Country	29	Zφ	Countr	У		8. This corporation has liability for Florida Statutes Yes	intangible ta	ax under s	199.032.
4	25 Name and Address of Curr		stered Agent				10. Name and Address of New F	legistered	Agent	
	В. Папто	.: 		8	1 Na	me		-		
LONDON	NO, GUSTAVO			8	2 St	eet Addr	ess (P.O. Box Number is Not Acceptate	ole)		
	UNIVERSITY DR			L	_L					
STE 10A				8	3					
SUNRISE	E FL 33322			8	4 Ci	у	85 Zip Code			Code
familiar with	h, and accept the obligations of S	ection 607	7,0505, Florida Stature	es NG to Registered A _s			d of directors. Thereby accept the app	DATE		
12.	OFFICERS.			13.	<u> </u>		ADDITIONS/CHANGES TO OF			
TITLE	PO								Chache	Acdition
NAME	LONDONO, GUSTAVO		DELETE	1:110	F	1			C * * * * * * * * * * * * * * * * * * *	
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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 early that I am an officer or director of the corporation or the receivor 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.

6.4 CHTY - \$1 - 71P

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GUSTANO LONDONO 6/04/96