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

PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90167 027 ***150.00

DOCUMENT # **L71025**

1. Corporat on Name

RXP PRODUCTS, INC.

Principal Place of Business Mailing Address	3. Date In corporated or Qualifed 05/08/1990 4. FEI Number 65-0195439 5. Certificate of Status Desired
1630 22ND STREET NORTH ST. PETERSBURG FL 33713 21. Principal Place of Business 22. Mailing Address 23. Mailing Address 24. FEI Number 25. Certificate of Status Desired 35. Certificate of Status Desired 36. Certificate of Status Desired 37. City & State 38. To Acditional Fee Required 38. Trust Fund Contribution 39. Name and Address of Current Registered Agent 30. Date In corporated or Qualifed 05/08/1990 4. FEI Number 65-0195439 Applied For 65-0195439 Suite, Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing Fee Required 7. Trust Fund Contribution 7. Country 8. This corporation owes the current year Intangible Personal Property Tax. 7. Yes [] No	3. Date In corporated or Qualifed 05/08/1990 4. FEI Number 65-0195439 5. Certificate of Status Desired
3. Date In corporated or Qualifed 05/08/1990 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Mailing Address 3. Date In corporated or Qualifed 05/08/1990 4. FEI Number 65-0195439 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State City & State 28 Zip Country Zip Country 30 Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State Trust F and Contribution Added to Fees Added to Fees Added to Fees Person al Property Tax. Yes [] No 9. Name and Address of New Registered Agent	05/08/1990 4. FEI Number 65-0195439 5. Certificate of Status Desired
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 5, Certificate of Status Desired Fee Required City & State City & State 6, Election Campaign Financing Trust Fund Contribution Added to Fees Zip Country Zip Country 8, This corporation owes the current year Intangible Personal Property Tax. 29 30 Name and Address of New Registered Agent Not Application of Application on Application of Status Desired Status Desired See See See Required \$8.75 Acditional Fee Required \$5.00 Nay Be Added to Fees Country 8, This corporation owes the current year Intangible Personal Property Tax. Yes [] No	5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation owes the current year Intangible Personal Property Tax. 10. Name and Address of New Registered Agent Address (P.O. Box Number is Not Acceptable) Fig. 85 Zip Code
Suite, Af t. #, etc.	5. Certificate of Status Desired \$8.75 Acditional Fee Required 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No 10. Name and Address of New Registered Agent Address (P.O. Box Number is Not Acceptable)
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22 27 Fee Req Jired	6. Election Campaign Financing S5.00 May Be Added to Fees 8. This corporation owes the current year Intangible Personal Property Tax. Yes No. 10. Name and Address of New Registered Agent Address (P.O. Box Number is Not Acceptable)
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Zip Country Zip Country 8. This corporation owes the current year I stangible 24 25 29 30 Personal Property Tax. Yes []No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	Personal Property Tax. 10. Name and Address of New Registered Agent Address (P.O. Box Number is Not Acceptable) F 2 85 Zip Code Lea poration submits this statement for the purpose of changing its registered
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code F Corporation submits this statement for the purpose of changing its registered
5. Italia di arte di a	Address (P.O. Box Number is Not Acceptable) F L 85 Zip Code Lea poration submits this statement for the purpose of changing its registered
R1 Name	Address (P.O. Box Number is Not Acceptable) F L 85 Zip Code Corporation submits this statement for the purpose of changing its registered
	F L 85 Zip Code
JOHNSON, DEAN F. 82 Street Address (P.O. Box Number is Not Acceptable)	F L 85 Zip Code
1630 ZZNU STREET NORTH	co poration submits this statement for the purpose of changing its registered
ST PETERSBURG FL 33713	co poration submits this statement for the purpose of changing its registered
84 City 85 Zip Code	co poration submits this statement for the purpose of changing its registered
	co poration submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its migistere office or registered agent, or both, in the State or 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 Stoppaure Noed or crinted hat he of registered agent and title if applicable. (NOTI : Registered Agent signature required when reinstating) DATE	pare and when remetations
Signature, types or princes have to triggist to again and also in approximate the second seco	ADDITICNS/CHANGES TO OFFICERS / ND DIRECTORS IN 12
14.	
NAME JOHNSON, DEAN F. 1.2 NAME	
STREET ADDRESS 1630 22ND STREET NORTH 1.3 STREET ADDRESS	
OT DESTROPHING EL	
	☐ Change ☐ Addition
NAME JEFFERSON, NANCY L. 2.2 NAME	
STREET ADDRESS 1630 22ND STREET NORTH 23 STREET ADDRESS	
AT DETERORUPO EL	
NAME WOODWARD, DON 3.2 NAME	☐ Change ☐ Addition
STREET ADDRESS 1630 22ND ST NORTH 33 STREET ADDRESS	☐ Change ☐ Addition
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NAME 4. 2 NAME	
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STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP	Change Addition

14. Thereby 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 or derivation 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.

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

WOODWARD

CR2E034 (11/98)