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

DOCUMENT #
1. Corporation Name

L75602

(7)

R.F.B. INDUSTRIES, INC.

Principal Place	of Business	Mailing Address				
	RE DRIVE SOUTH DENA FL 33707-4606	7101 S. SHORE DRIVE SOUTH PASADENA FL				
				3. Date Incorporated or Qualified 05/23/1990	3a. Date of Las	
Principal Place of Business 2a. Mailing Address				4. FEI Number		Applied For
	Sucer Dos	26 1101 S. SKE	DE DE S.	59-3009879		Not Applicable
Suite. Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		.75 Additional ee Required
City & State	PREMIERA TE	City & State	emocrea Te	Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees
710 J31	Country 25 VINC 164	29 33767	Country (30 Kins - 1/As	This corporation has liability for if Florida Statutes	ntangible tax unde	
=	9. Name and Address of Current	Registered Agent	24	10. Name and Address of New R	egistered Agent	
DOLOTE	AAREAT E		81 Name			
BOLSTER ROBERT F 7101 S SHORE DR S			B2 Street Add	ress (P.O. Box Number is Not Acceptab	ie)	
	PASADENA FL 33707		83			
			84 City		85	Zip Code
	ar - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -			ration submits this statement for the pur		·
SIGNATURE. s	ilgrah re, typed or printeo name of registered agent a OFFICERS AND		TE: Registered Agent signature require	ad when reinstating) ADDITIONS/CHANGES TO OFFI	DATE ICERS AND DIREC	CTORS IN 12
TITLE	P	☐ DELETE	1. 1 TITLE	•	☐ Chan	
NAME	BOLSTER, ROBERT F		1.2 NAME			
STREET ADDRESS	7101 SOUTH SHORE DR S S PASADENA FL	•	1.3 STREET ADDRESS			
CHY-ST-ZIP TULE	S	DELETE	1.4 CITY-ST-ZIP 2 1 TITLE		☐ Chan	ge 🗀 Addition
NAME	BOLSTER, NONA P		2.2 NAME		onar	go
STREET ADDRESS	7101 SOUTH SHORE DR S		2.3 STREET ADDRESS			
CITY - ST - ZIP	S PASADENA FL		2.4 CITY-ST-ZIP			
TIFLE		DELETE	3. 1 TITLE		Chan	ge 🔲 Addition
NAME			3 2 NAME			
STREET ADDRESS			3.3. STREET ADDRESS			
TIPLE		□ DELETE	3.4 CITY - ST - ZIP		C Chan	
NAME		E) butte	4. 1 TITLE 4.2 NAME		☐ Chan	ge Addition
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST ZIP			4 4 CITY - ST - ZIP			
TRUE		☐ DELETE	5 1 THILE		☐ Chan	ge Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
C:1Y-\$1-ZiP			5 4 CITY - ST - ZIP			
TITLE		DELETE	6 1 TITLE		Chan	ge Addition
NAMÉ			6.2 NAME			
STHEFT ADDRESS			6 3 STREET ADDRESS			
C-TY-ST-Z:P	codify that the information supplied	ith this filing is unlentarity from	6 4 CITY - ST - ZIP	for the exemption stated in Section 119.	OT/0141 FE 12: 61	
certify that t oath; that I	the information indicated on this annua	il report or supplemental anni ation or the receiver or truster	ual report is true and accura e empowered to execute th	nor the exemption stated in Section 119.1 ate and that my signature shall have the is report as required by Chapter 607, Flo	same local effect s	e if made under

SIGNATURE:

Koker A. Habeler To Caller To Date of Director

2/19/96 (812) 343-4461

CR2E034 (12/95)