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PROFIT CORPORATION ANNUAL REPORT

1999

DOCUMENT #

1. Corporation Name REX-TONE, INC.



M07368

FLORIDA DEPAF, TMENT OF STATE

Katherine Harris

DIVISION OF CORPORATIONS

Secretary of State

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90026 031 ***150.00



Mailing Address Principal Place of Business 7220 NW 77TH ST. 7220 NW 771'H ST. MIAMI FL 33166 **MIAMI FL 33166** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/05/1984 Applied For FEL Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 59-2461325 26 21 \$8.75 Acditional Suite, Apt. #, etc. Suite, At t. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State \Box Added to Fees Trust F and Contribution 23 28 Country 8. This corporation owes the current year Intangible Country Zip Zip []No Personal Property Tax. 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Add ess of Current Registered Agent PENICHET, JOSE F 82 Street Acdress (P.O. Box Number is Not Acceptable) 7220 NW 77TH ST. **MIAMI FL 33166** 83 85 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or rporation 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 a cept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature req iired when reinstating) Signature, typed or printed ni me of registered agen, and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change ☐ Addition DELETE 11 TM F TITLE 1.2 NAME PENICHET, JOSE F. NAME 1.3 STREET ADDRESS 7220 NW 77TH ST. STREET ADDR :SS MIAMI FL 14 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 3.1 TITLE TITLE NAME 3.3 STREET ADDRESS STREET ADDF ESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE ☐ Change 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDF ESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDICESS 5.4 CITY-ST-ZIP CITY-ST-Z\F 6.1 TITLE Change ☐ Addition DELETE TITLE 6 2 NAME NAME

6.4 CITY-ST-ZIF 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 suppliemental annual report is true and accurate and have the same legal effect as if made under oath; that am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chap er 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing or on an attachment with an address, with all other like empowered. CITY-ST-ZIP

6.3 STREET ADDR

SIGNATURE:

STREET ADD RESS

OF SIGNING OFFICER OR DIRECTOR

(11/98)CR2E034