

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90034 021 ***150.00

DOCUMENT # P00000038028
 1. Entity Name
REIN INVESTMENTS, INC.

Principal Place of Business Mailing Address
2033 MAIN STREET #600 **2033 MAIN STREET #600**
SARASOTA FL 34237 **SARASOTA FL 34237**



2. Principal Place of Business 3. Mailing Address
2831 RINGLING BLVD. **2831 RINGLING BLVD.**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
SUITE B-107 **SUITE B-107**
 City & State City & State
SARASOTA, FL **SARASOTA, FL**
 Zip Country Zip Country
34237 **USA** **34237** **USA**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
MYERS, JOHN H
2831 RINGLING BLVD.
SUITE B-107
SARASOTA FL 34237

4. FEI Number **65-1001384** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
 SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State
 10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	PFLUGNER, J G	
STREET ADDRESS	2033 MAIN STREET, SUITE 600	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE	DVPS	<input checked="" type="checkbox"/> Delete
NAME	MYERS, TROY H JR	
STREET ADDRESS	2033 MAIN STREET, SUITE 600	
CITY-ST-ZIP	SARASOTA FL 34237	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RON STAHL	
STREET ADDRESS	2831 Ringling Blvd, Ste B-107	
CITY-ST-ZIP	Sarasota, FL 34237	
TITLE	DVPS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN H. MYERS	
STREET ADDRESS	2831 Ringling Blvd, Ste. B-107	
CITY-ST-ZIP	SARASOTA, FL 34237	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: John H. Myers VPS Date: 1/19/02 Daytime Phone #: 941 955 2228

CRZE034 (9/01)