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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

RUM F	ROW, LTD., CO.				
Principal Plac	ce of Business	Mailing Address			ON BIRN OLDN GADY BIRN 1001
P.O. BOX 1040 P.O. BOX 1040 GRAND CAYMAN GRAND CAYMAN CAYMAN ISLAND CAYMAN ISLAND				DO NOT WRITE IN THIS	S SPACE
				3. Date Incorporated or Qualified 12/16/1985	
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt.	# etc.	Suite, Apt. #, etc.		NOT APPLICABLE	Not Applicable \$8.75 Additional
├		27		5. Certificate of Status Desired	Fee Required
I CIVA SIBH		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zip	Country	8. This corporation owes or has paid the ci	_ ' _ '
24	25 g, Name and Address of Curre	29 Agent	30	Personal Property Tax due June 30. 10, Name and Address of New Registered	Yes No
SALVATORI, LEO J. 81 Name					
4501 TAMIAMI TRAIL NO., STE 300			99 Compt Add	(DO Double of Mat Associable)	
NAPLES FL 33940-0060			82 Street Add	lress (P.O. Box Number is Not Acceptable)	1
			83		
	•.		84 City	Fi	85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12,	Signature, typed or printed name of registered a	gent and title if applicable. (NO ND DIRECTORS	1E: Registered Agent signature requ		ID DIDECTORS IN 10
TITLE	PO	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	SCHMIDT, EVELINE		1.2 NAME		
STREET ADDRESS	CAMPOS ELISEOS 112A CO	OL. PALANCO	1.3 STREET ADDRESS		
CITY-ST-ZIP	MEXICO DF		1.4 CITY-SI-ZIP		
TITLE	STD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DOERR, DANIEL		22 NAME		
STREET ADDRESS	2100 WASHINGTON		2.3 STREET ADDRESS	•	
CITY-ST-ZIP	GRAFTON WI	**	2. 4 CITY-ST-ZIP		
TITLE	D DEDALTA ALERO	X DELETE	3.1 TITLE		Change Addition
NAME	PERALTA, ALEJO	I CAN HIAN ADAGON	3.2 NAME		
STREET ADDRESS	ORIENTE 171, NO. 398, CO MEXICO DF 07470	L. SAN JUAN AKAGUN	3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D DI DI TITO	☐ DÉLETÉ	3.4 CITY-ST-ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	LOOS, HENRY	pecele	4.2 NAME		Change Addition
STREET ADDRESS	411 EAST WINSCONSIN AV	ENUE	4.2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP	MILWAUKEE WI 53202		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		27 LB
STREET ADDRESS			5.3 STREET ADDRESS		10/V
CITY-ST-ZIP			5 4 CiTY-ST-ZIP		0/.
TITLE		DELETE	6.1 TITLE	بردان بالدنان والمدار والمال والمدار والمال والمال والمال والمال والمال	Change Addition
NAME			6.2 NAME	8000024296 -02/13/98010060	U(5)
STREET ADDRESS			6.3 STREET ADDRESS	7967157387791UUb~~U	Τί

6.4 City - ST- ZIP

***150.00 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 supplemental annual 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 of the 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 oath; that I am an officer or director of the corporation of the certify that the information indicated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)(ii). Florida Statutes. I further certificate in Section 119.07(3)(ii). Florida

FILED

Feb 12 1998 8:00am

Secretary of State