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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P37357

(1)

RINGLER SECURITIES SERVICES, INC.

		١	•

inclpat Place of Businoss Mailing Address

FILED Apr 16 1997 8:00am Secretary of State

		·			Bi Bi (B B B B B B B B B B	
Principal Pla	ace of Business	Mailing Address		n innecone ion orse (mann feid) dies (dib.)	BIDIL GIBIL BIBIL BIBIL BIBIL BIBIL FIBI	
	STREET, SUITE 300 EACH CA 92660	5000 BIRCH STREET, SUIT NEWPORT BEACH CA 926				
				3. Date Incorporated or Qualified	3a. Date of Last Report	
				01/29/1992	02/13/1996	
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		33-0413079	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional	
27					Fee Required	
City & State City & State		<u>-</u>		, , ,	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
23 Zip	Country	[28] Z _{(D}	Country	Trust Fund Contribution	7,0000 10 1 000	
24	25			8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes No	
24)	9. Name and Address of Currer		30	10. Name and Address of New Reg		
LAN.	GGINS, CURT		81 Name	Aut Winging	, soit a right	
	81 UNIVERSITY BLVD		<u> </u>	we wiggins		
	NTER PARK FL 32792		82 Street Ad	dress (B.G. Box Number's Not Acceptable	9	
***	WILK PAIN I C 02/02		83	<u> </u>		
			84 City)},	inter Park	FI 85 Zip Code	
11. Pursuan office or	t to the provisions of Sections 607.050 registered agent, or both, in the State	02 and 607.1508, Florida Statuto of Florida, Such change was a	es, the above-named co outhorized by the corpor	orporation submits this statement for the praction's board of directors. I hereby accep	irpose of changing its registered the appointment as registered	
		ations of, Section 607.0505, Flo	rida Statutes.			
SIGNATURE	Signature, typed or printed name of registered age	ont and title if sophicable. (NOTE	Registered Agent signature req	sulred when reinstating)	DA16.	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES 10 OFFICE		
TITLE	CDP	DELETE	1.1 117LE		Change Addition	
NAME	BLATTENBERG, ROBERT J.		1.2 NAME			
STREET ADDRESS	5000 BIRCH STREET #300		1.3 STREET ADDRESS			
CITY-ST-ZIP	NEWPORT BEACH CA	4	1.4 City-St-ZiP			
TITLE	VČV	DELETE	21 HILE		Change	
NAME	RINGLER, DAVID V.	. •	2.2 NAME	aul A Hottman	• •	
STREET ADDRESS			2.3 STREET ADDRESS	aul A. Hoffman 16 John St. #>320 Jew York, Ny 1003!	••	
CITY-ST-ZIP	NEWPORT BEACH CA		2. 4 CITY-ST-ZIP	Jew York, NY 10031	8	
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS	:		3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. C(1Y - S1 - ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS	ş i		4.3 STREET ADDRESS			
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	4.4 CITY+ ST- ZIP			
FITLE		☐ DEEETE	5.1 TITLE		Change Addition	
NAME			5.2 NAM€			
STREET ADDRESS	; 		5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			64 City - St - ZiP			

14. I do 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 eath; that I am an officer or director of the co-joration or the receiver or frusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 changed, of an attachment with an address.

1 0 00

111 000 0