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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1, Corporation Name RUSTY DAVIS, INC. P93000011287 (8)

FILED Apr 30 1998 8:00am Secretary of State

			· ···· ·			
Principal Place		Mailing Address	_			
5320 EAGLE LAKE DR. 220 HIGHGATE STREET						
PALM BEACH GARDENS FL 33418		HENDERSON NV 89014			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					02/08/1993	
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		[26]			65-0389540	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			5. Certificate of dialos besided	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23		28	T		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Cou	itry	8. This corporation owes or has paid the current Personal Property Tax due June 30.	
24	25 g. Name and Address of Current	29 Registered Agent	30		10. Name and Address of New Registered Age	
RD/	OCKMEYER, GARY	Trogratorou Agunt		81 Name	10.	
	O P.G.A. BLVD.				100 b M 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	. 350			82 Street A	Address (P.O. Box Number is Not Acceptable)	
	M BEACH GARDENS FL 33410		}	83		
						1 6
				84 City	FL!	85 Zip Code
11. Pursuant I	o the provisions of Sections 607,0502	and 607 1508, Florida Statu	tes, the at	ove named	corporation submits this statement for the purpose of ch	anging its registered
office or re agent I ar	egistered agent, or both in the State i m familiar with, and accept the obliga	of Florida: Such change was hons of, Section 607.0505, F	authonzed Iorida Stat	i by the corp lites	oration's board of directors. I hereby accept the appoin	mieni as registered
SIGNATURE						
SIGNATORE	Signature, typical or printed name of regularies as agre			Agent signature	required when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS IN 12 Change Addition
TITLE	DAVIS, RUSTIN L	DELFTE	1.1 TII		L	Change T Montion
rame	220 HIGHGATE STREET		1 2 NA			
STREET ADDRESS	HENDERSON NV 89014			REET ADDRESS		
CITY-ST-ZIP TITLE	VP	DELETE	2171	Y-ST-ZIP		Change
NAME	DAME CHAMA		2 2 NA	ľ		
STREET ADDRESS	AND LICHOATE CIDECT			HEET ADDRESS		
CITY-ST-ZIP	HENDERSON NV 89014			TY-ST-ZIP		
TITLE	ST	DELETE	31111			Change Addition
NAME	DAVIS, ANGELA M	—	3 2 NA			
STREET ADDRESS	220 HIGHGATE STREET		3351	HEET ADDRESS		
City-St-ZiP	HENDERSON NV 89014		3.4. C	1Y - S1 - ZIP		
TITLE		DELFTE	4 1 TI	l f		Change Addition
NAME			4 2 N	4ME		
STREET ADDRESS			4351	REET ADDRESS		
CITY-ST ZIP			44 C)	ry-st-zip		
TITLE		☐ DELETE	5 1 11	LE		Change Addition
NAME			5 2 NA	MF		
STREET ADDRESS			53 ST	REET ADDRESS		
CITY-ST-ZIP				IY-S1-2IP		
TITLE		☐ DELETE	6 1 TI		<u> </u>	Change Addition
NAME			62 N			
STREET ADDRESS				REET ADDRESS		
CiTY-ST-ZiP			6 4 CI	IY-S1-ZIP	od in Section 110 07/3V/) Florida Statutos I further cartif	u that the information

dons not qualify for the exemption staled in Section 119.07(3)(i). Florida Statules. I further certify that the informatic ort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ic empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in