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 # P93000021606 (7)

R.E. DUNN INVESTMENT, INC.

FILED May 05 1998 8:00am Secretary of State

Principal Place 527 LA POSE 87 PERENSEL	STÄVE	Mailing Address 527 LA PLAZA AVE ST-PETERSOLING FL 33707		DO NOT WRITE			
,				3. Date Incorporated or Qualified 03/18/1993			ļ
2. Principal P	lace of Business	2a. Mailing Address	4	4. FEI Number		T Ar	pplied For
21 283	6-5 m Ave No	26 2836-5	MAVE 10	59-3168855			t Applicable
Suite, Apt.		Suite, Apt. #, etc. 27 Ste 101		5. Certificate of Status Desired	À	,	Additional
City & State	Pete FL	City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added	May Be to Fees
Zip 24 337	13 Country 25 NOSA	29 337133	O USA	This corporation owes or has particular Personal Property Tax due June	30. 🔲	res [angible No
527	9. Name and Address of Current I NN, RICKY E 7 LA PLAZA AVE PETERSBURG FL 33707	Registered Agent	81 Name 82 Street Addres 83 84 City	10. Name and Address of New Re	ole)		Code
office or re agent. I ar SIGNATURE	to the provisions of Sections 607.0502 egistered agont, or both, in the State of m familiar with, and accept the obligation state. Signature, typed or printed name of registered agont.	Florida Such change was autoris of, Section 607.0505, Floridand Hille III applicable (NOTE F	thorized by the corporati	on's board of directors. I hereby acce ed when reinstating)	pt the appoin	ment as	registered
12.	OFFICERS AND I		13.	ADDITIONS/CHANGES TO OFFICE			
TITLE	P NAME WORKE	☐ DELETE	1.1 TITLE		<u></u>	Change	☐ Addition
NAME	DUNN, RICKY E. 527 LA PLAZA AVE		1.2 NAME				
STREET ADDRESS	ST PETERSBURG FL		1.3 STREET ADDRESS				ı
CITY-ST-ZIP TITLE	ST PETENSOUND TE	☐ DELETE	1.4 CITY-ST-ZIP 2 1 TIYLE	700		Change	Addition
NAME			2.2 NAME			e na ngo	
STREET ADDRESS			2.3 STREET ADDRESS				l
CITY-ST-ZIP			2. 4 CITY-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				Į
CITY-ST-ZIP			3.4. CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·			
TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME		·	4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY - ST - ZIP		17 65 676	4.4 CITY - ST - ZIP			05	Addito
TITLE		DELETE	5.1 TITLE		L	Change	Addition
NAME			5.2 NAME				
STREET ADDRESS		,	5.3 STREET ADDRESS				
Crty-St-ZIP		Thruste	54 CITY - ST - ZIP			Chance	Addition
TITLE		☐ DELETE	6.1 TITLE		L	Change	L. Addition
NAME			6.2 NAME				
STREET ADDRESS		i	6.3 STREET ADDRESS				}
City-St-ZiP			64 CITY-ST-ZIP				

4. 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 receiver of histee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter or the property of the property of

SIGNATURE

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