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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1998

## **FILED** Jan 20 1998 8:00am Secretary of State

DOCU 1. Corporatio RHINO	MENT # <b>P9300</b> MARKETING, INC.	0037269 (6)			
Principal Plac	e of Business	Mailing Address	<del> </del>		
2424 BUTLER BAY DR. N. 2424 BUTLER BAY DR. I			N.		
WINDERMERE FL 34786 WINDERMERE F					
US		US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified 05/24/1993	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0412857	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25   9. Name and Address of Curre	29 Agent	30	Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
RI	ODIG, GREGORY J	Marie	81 Name	10. Immo mm reacess or near neglotelet	
	80 N. FEDERAL HWY.				
FT. LAUDERDALE FL 33305			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
			83		
			84 City	FI	85 Zip Code
SIGNATURE	Signature, typed or printed name of registered at OFFICERS AI	ND DIRECTORS	TE: Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	DENNY, JO-ANNE	DELETE	1.1 TITLE		Change Addition
NAME	2424 BUTLER BAY DR. N.		1.2 NAME		
STREET ADORESS	WINDERMERE FL		1.3 STREET ADDRESS   1.4 CITY - ST - ZIP		
CITY - ST - ZIP	P	DELETE	2.1 TITLE		Change Addition
NAME	DENNY, JIM		2,2 NAME		
STREET ADORESS	2424 BULTER BAY DR. N.		2.3 STREET ADDRESS		
CITY - ST - ZIP	WINDERMERE FL		2 4 CITY-ST-ZIP	· <del></del>	
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4. CITY - ST - ZIP		T Observe T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADORESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAME			5.2 NAME		TT Autubo TT Vadititiii
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		<del>_</del>	6,2 NAME		- <del>-</del>
STREET ADDRESS			. 6.3 STREET ADDRESS	·	
CITY-ST-ZIP	<u> </u>		6.4 CITY - ST - ZIP		
	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 upe shall have the same legal effect as if made up	certify that the information

s and accurate and that my signature shall have the same legal effect as it made under oath; that I am an wered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

407-816-5540