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 # P93000049440 (9)

R G S REALTY CORPORATION

FILED
Apr 07 1997 8:00am
Secretary of State

Principal Place of Business 2922 CARDINAL DR SUITE A2 VERO BEACH FL 32963 US 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23		2822 CARDINAI SUITE A2 VERO BEACH I US 2a. Mailing Ai 26 Suite. Apt	VERO BEACH FL 32963-1971 US 28. Mailing Address 26 Suite Apt. #, etc. 27 City & State		3. Date Incorporated or Qualified 07/08/1993 4. FEI Number 59-3 19 1434 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution	3a. Date of 07/01/19	3a. Date of Last Report 07/01/1996 Applied For Not Applicable		
Z-p	Country	Zip		Country	/	8. This corporation has liability for			
24]	25]	29	30	<u> </u>			Yes No		
	me and Address of Curr	ent Registered Age	nt		Name	10. Name and Address of New Re	gistered Agent		
SCHAUB, RIC				81	Name .				
2922 CARDIN	KAL DH			82	Street Add	dress (P.O. Box Number is Not Acceptat	ole)		
Suite A2 Vero Beach	l FI 32963			83	 		***************************************		
TERO DEMOI	1 1 F ARAAA			<u> </u>			1	7: -	
				84	City		FL 85	Zip Co)(18
12. PD	y color not ad record registered a	gent and title it applicable. ND DIRECTORS	(NOTE R	13. 1.1 TITLE	HARC ent signature requ	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRE		IN 12 Addition
STREET ACORESS 5601 N	I A1A, 200N BEACH FL 32963] DELETE	1.2 NAME 1.3 STREET 1.4 CITY - 5 2.1 TITLE	T ADDRESS ST-ZIP			hange	Addilion
STREET ADDRESS 5601 N VERO	/B, MARY B I A1A, 200N BEACH FL			2. 4 CITY-	T ADDRESS ST - ZIP				
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COTY - ST - ZOP			i		r address		٦٠		
CITY ST ZIP TITLE NAME STREET ADDRESS CITY ST Z4"			OELETE	4.3 STREET 4.4 CITY-1 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP T ADDRESS	·		hange	Addition

. Loo 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Placet. 13 or Placet 13 of phonorid, or on an attackment with an address.

SIGNATURE

VALUE AND TYPED OR PHINTED NAME OF BIGNING OFFICER OR DIRECTOR

CHAUS 719

Daytime Flione #