## 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 #

P93000050663 (2)

## FILED Apr 27 1998 8:00am Secretary of State

FMB/RJC, INC.						3 (88)(88) 410 11118 410(1 88)(1 88)(1 88)(1 88)(1 88)(1	ini Baya Ayis ai	1 <b>80</b> (31) 1 <b>00</b> (	
Principal Place of Business Mailing Address						S ACCOUNTS AND SOURCE CORES AND LES ENTIT OF ICE OF	(III <b>Du</b> il <b>o d</b> iiio dii	10 <b>4</b> (1)1 1001	
1160 ESTERO BOULEVARD 140 BAHIA VIA FORT MYERS BEACH FL 33931 FT. MYERS BEACH FL 3393' US			3931	1		DO NOT WRITE IN THIS	S SPACE		
00						3. Date Incorporated or Qualified			
						07/13/1993			
	lace of Business	2a. Mailing Address				4. FEI Number	Applied For Not Applicable		
Suite, Apt	#. etc.	Suite, Apt. #, etc.				65-0438256	CO 75 A 4484		
22		27				5. Certificate of Status Desired	<b>+</b> + ·	equired	
City & State	0	City & State				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip	Country	Z.ip	Cou	ntry		8. This corporation owes or has paid the c			
24	25   29   30   9. Name and Address of Current Registered Agent		30			Personal Property Tax due June 30.  10. Name and Address of New Registerer		No	
	<u></u>	negistered Agent		81	Name	10. Name and Address of New Registere	1 whene		
CALAMONERI, RICHARD J 140 BAHIA VIA									
	MYERS BEACH FL 33931			82	Street Addr	ess (P.O. Box Number is Not Acceptable)			
* * * *				83					
			-	84	City		<b>85</b> Zip	Code	
					•	F	<u> </u>		
<ol> <li>Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida S</li> </ol>					the corporat	oration submits this statement for the purpose ion's board of <b>d</b> irectors. I hereby accept the ap	of changing if opointment as	registered registered	
SIGNATURE		807	C B			ed when reinstatino) DATE			
12.	Signature, typod or printed name of registered agent OFFICERS AND		13,	) Agen	i signature requir	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTOR	3S IN 12	
TITLE	P	DELETE 1.1 TO		TLE			Change	Addition	
NAME	CALAMONERI, RICHARD J.		1.2 NAM						
STREET ADDRESS	140 BAHIAVIA		1.3 STREET ADDRES		NDDRESS			ļi	
CITY-ST-ZIP	FORT MYERS BEACH FL			TY-ST	-ZIP		170		
TITLE		☐ DELETE	2.1 711				Change	Addition	
NAME CZDECT ADDRESS			2.2 NA		ADDRESS	.1			
STREET ADDRESS CITY-ST-ZIP			neel A ITY-ST						
TITLE	-	DELETE 317			1-215		Change	Addition	
NAME		3.2 N							
STREET ADDRESS			REET A	ADDRESS					
CITY-ST-ZIP	34.0		11Y-\$1	r- 21P					
TITLE		☐ DELETE	4.1 711	ILE			Change	Addition	
NAME			4. 2 N	AME					
STREET ADDRESS			4.3 ST	REET A	ADDRESS				
CITY-ST-ZIP		DELETE		4.4 CITY - ST - ZIP 5.1 TITLE			Change	Addition	
TITLE NAME		□ veresc	5.1 HII 5.2 NA				C Ollaringe	Addition	
STREET ADDRESS			•		ADDRESS				
CITY-ST-ZIP			5.4 CITY - 5						
TITLE		☐ DELETE	6.1 TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	<b>‡</b>		6.2 NA	<b>LME</b>					
STREET ADDRESS	1 w		6.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			6.4 CI	TY-\$1	- ZIP				
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14. 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 or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or on an attachment with an address.

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