05-01-1999 90097 026 \*\*\*150.00

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

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # POSOCORE749

1. Corporation RK COM	PUTERS, INC.									
Principal Place of Business Mailing Address						F IMMITME LEGEN (FILE MARIEL AM		#1 1838 B4113 18811 1	11818 1911 1881	
237 GOOLSBY BLVD DEERFIELD BEACH FL 33442 US		237 GOOLSBY BLVD DEERFIELD BEACH FL 33442 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed 12/20/1993				
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			plied For	
			lsby Blvd			65-0463809			t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
22		27			5. Certificate of Status Desired Fee Required					
City & State		City & State				6. Election Campaign Financing \$5.00 May Be				
	<u>rfield Beach FL</u>		Deerfield Beach			Trust Fund Contribution Added to Fees				
Zip	Country	Zip	Country	•		8. This corporation owes the curre	ent year l		□No	
24 334		29 22442 30	L µs	iΑ		Personal Property Tax.  10. Name and Address of New R	enistere		<u> </u>	
Name and Address of Current Registered Agent				Name		To. Marie and Address of New N	iogistere_	u rigotit		
KIMRAJ, RONALD				,						
237	•				ss (P.O. Box Number is Not Accepta	ible)				
DEERFIELD BEACH FL 33442			83	3 225	<del>G (</del>	oolsby Blvd				
						2 42 2 44 7 4 7 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1		7. les 137-7		
				B4 City Deerfieldeach FL 85 33442					142	
SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age			when reinstating)	DATE			
12,			13.		1	ADDITIONS/CHANGES TO OF	FICERS	AND DIRECTO	Addition	
TITLE	PSD CONTRACTOR	☐ DELETE	1.1 TITLE					LACHANGE	☐ Addition 1	
NAME	KIMRAJ, RONALD		1.2 NAME		201	Caalaby Blud				
STREET ADDRESS	237 GOOLSBY BLVD					Goolsby Blvd	FI	33442		
CITY+ST-ZIP	DEERFIELD BEACH FL			1.4 CITY-ST-ZIP DE		erfield Beach	<u> </u>	<u> </u>	Addition	
NAME			2.2 NAME		1	•		_ ,	_	
STREET ADDRESS	· '	•		2.3 STREET ADDRESS						
CITY-ST-ZIP			2.4 CITY-ST-ZIP							
· TITLE			3.1 TITLE				-	Change	Addition	
NAME			3.2 NAME						,	
STREET ADDRESS			3.3 STREI	ET ADDRESS						
CITY-ST-ZIP	3		3.4. CITY-	ST- ZIP			_			
TITLE		☐ DELETE	4.1 TITLE		Ţ			Change	☐ Addition (	
NAME	·		4. 2 NAME	ŧ						
STREET ADDRESS	•		4.3 STREE	ET ADDRESS						
CITY-ST-ZIP			4.4 CITY-	ST-ZIP						
TITLE	- <del></del>	☐ DELETE	5.1 TITLE		1	• •		· Change	☐ Addition	
NAME			5.2 NAME		-					
STREET ADDRESS			i	ET ADDRESS						
CITY-ST-7IP			5.4 CMY-	ST-ZīP	1				- 1	

CITY-ST-ZIP 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 changes or on an attachment with an address, with all other like empowered.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

☐ DELETE

4/26/99

725-8737

Change

☐ Addition