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 # P93000088440 (1)

RAMBUSCH ACCOUNTING AND MANAGEMENT, INC.

Principal Place of Business Mailing Address 11856 QUAIL RUN DR P.O. BOX 08411 FT MYERS FL 33908 FT MYERS FL 33908-2146 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/21/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0458438 26 Not Applicable Suite, Apt #, etc Suite Apt # elc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country Zin Country This corporation has paid the current year intengible 24 □ No 29 Personal Property Tax due June 30. Yes 26 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAMBUSCH, H. WILLIAM JR Rambusch 11856 QUAIL RUN DR 82 Street Address (P.O. Box Number is Not Acceptable) FT MYERS FL 33908 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the originations of Section 607.0505, Florida Statutes. VIRGINIA RAMBUSCH, Vresident Signature typed proposed raise of r OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELFTE 1.1 TITLE Change RAMBUSCH, VIRGINIA S NAME 1.2 NAME 11856 QUAIL RUN DR. in Dr STREET ADDRESS 1.3 STREET ADDRESS FT MYERS FL 33908 CITY-ST-ZIP 1.4 CITY-ST-ZIP FatMyer TITLE DELFTE 2.1 TOLE -RAMBUSCH, HAROLD NAME 2.2 NAME 17 Pine Clove Dr STREET ADDRESS 11858 QUAIL RUN DR. 2.3 STREET ADDRESS FORT MYERS FL CITY-SI-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS TX 78705 CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change TITLE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change TITLE Addition 51 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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 roport 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.

5.4 CITY - ST - ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

CICALATUDE.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Vizionia Damatina

DELETE

1.1.00

1941) 420-2408

Change

Addition

FILED

Feb 27 1998 8:00am

Secretary of State

3R2E034 (10/97)