FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT	# DO	เกกกก

0043771 (2)

1. Corporation Name RENA AMERICA, INC.

Principal Place of Business	

Mailing Address



4 SAWGRAS PONTE VED	SS VILLAGE RA BEACH FL 32082	P.O. BOX 1936 PONTE VEDRA BEAG	CH FL 32004		3. Date Incorporated or Qualified	3a. Date of Last	Report	
					06/03/1994	04/27/	/1995	
2. Principal Plac		2a. Mailing Address			4. FEI Number		Applied For	
21 ZOI PTP TOUR BLVD 26				59-3253650		Not Applicable		
Suite, Apt. #, etc Suite, Apt. #, etc. 27				5. Certificate of Status Desired	1 1 7 .	5 Additional Required		
	VEDRA BEACH, FL.	City & State	7		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
^{Ζφ} 32ο	Country	Zip Zii i	Countr	У	8. This corporation has liability for in		s 199.032,	
24 320	9. Name and Address of Current	29 Registered Apont	30		Florida Statutes			
	9. Name and Address of Current	negistered Agent		I Name	10. Name and Address of New Ho	egisterea Agent		
4 SAW(PONTE 11. Pursuant to or registered	CHER, JUERGEN GRASS VILLAGE VEDRA BEACH FL 92082 The provisions of Sections 607 0502 d agent, or both, in the State of Florid , and accept the obligations of, Sections of Sections (Company)	 Such change was authorized 	ed by the cor	201 POWTE	dress (P.O. Box Number is Not Acceptable ATP TOUR SLUD VEDRA BEACH covation submits this statement for the purporat of directors. I hereby accept the appoint	# /62 FL 85 a	Zio Code s registered office ed agent. I am	
SIGNATURE _	· • • • • • • • • • • • • • • • • • • •							
Sk	gnature typed or printed name of reg≪ined agent to OFFICE DS AND	and their approache (N.)		ent signature renje	ment when reast singl	DATE		
12.	O' LIOCUO A IL	, DITEOTOTIS	13.		ADDITIONS/CHANGES TO OFFI			
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NAME			6.2 NAMI					
STREET ADDRESS				ET ADDRESS				
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Too hereby certly that the information of supplied with this lining is voluntarily turnished and obes not quality for the exemption stated in Section 1.19.07 (a)kit, montal stated in Section 1.19.07 (a)kit, montal report or supplied 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904 273-0708 Electric Product