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

Mailing Address

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED** 

Apr 30 1998 8:00am

Secretary of State

904-273.0708

04/24/88

DOCUMENT # P94000043771 (2)

RENA AMERICA, INC.

Principal Place of Business

STREET ADORESS

SIGNATURE:

201 ATP TO #162 PONTE VEI US	OUR BLVD. DRA BEACH FL 32082	P.O. BOX 1936 PONTE VEDRA BEAC	CH FL 32004			DO NOT WRITE IN TH  3. Date Incorporated or Qualified  06/03/1994	S SPACE		<del></del>
• Principa	Place of Business	2a. Mailing Address				4. FEI Number		TARK	lied For
21	Triace of Educations	<u>}                                    </u>				59-3253650	Applied For Not Applicable		
Suite, Apt #, etc		Suite, Apl. #, etc.				¢9.75 Addition			
2	,, 5.0	27				5. Certificate of Status Desired Fee Required			
City & St	tato	City & State				6. Election Campaign Financing	\$5	.00 i	May Be
3		28				Trust Fund Contribution		dded to	
Zιρ	Country	Zφ	Cou	untry		8. This corporation owes or has paid the	current ye	ar Inta	ngible
4	25	29	30			Personal Property Tax due June 30.	Yes Yes		No
	g. Name and Address of Curre	ent Registered Agent		Ĺ.,		10. Name and Address of New Registers	d Agent		
	BOETTCHER, JUERGEN			81	Name				
	201 ATP TOUR BLVD.			62	Street Add	ress (P.O. Box Number is Not Acceptable)			
-	F162				·				
r	PONTE VEDRA BEACH FL 32082			83					
				84	City		85	Zip C	ode
				ĻJ	l	poration submits this statement for the purpose		<del> </del>	<del></del>
<b>12</b> .	Signature typied in printed name of registered in OFFICERS AF	ND DELETORS	13.			and when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRE		IN 12
	BOETTCHER, JUERGEN	E) DETER	1				டிபா	ange	
NAME	AND ATO TOUR DUE ALON		1.2 N		1000000				
STREET ADDRES	PONTE VEDRA BEACH FL				ADDRESS				
CITY-ST-ZIP TITLE	7 01112 720171 22110111	DELETE	2.1 11	TLF	1-219		Ch	ange	Addition
NAME		L.J 1771.11	2.2 N				123 0		
STREET ADDRES	s				ADDRESS				
CITY-ST-ZIP			1		ST-ZIP				
TITLE	DELETE 31					☐ Ch	ange	Addition	
NAME			32 N	AME	}				
STREET ADDRES	s		3.3 S	REET	ADDRESS				
CITY-ST-ZIP			34. C	ITY-S	51 - ZIP				
TITLE		DELETE	41 TI	TLE			☐ Ch	ange	Addition
NAME			4.2 N	IAME					
STREET ADORES	s		435	TREET	address				
City - ST - ZiP			44 CI	ITY-S	r-ZIP				
TITLE		DELETE	5 1 TI	TLF	T -		☐ Ch	ange	Addition
NAME			. 52 N	AME					
STREET ADDRES	s		5381	IREET	address				
CITY-ST-ZIP				IY S	r-ZIP				
TITLE		DELETE	61 TI	TLE			Ch:	ange	Addition

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 truestored 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.

SOETTE HAR

K-thele