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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90093 024 \*\*\*150.00

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P94000044800

CITY-ST-ZIP

SIGNATURE:

RFO VENTURES INC.

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			DAII							
PALM CITY FL	ey Creek Trail. 14990		3408 SW BESSEY CREEK TRAIL PALM CITY FL 34990							
US		US				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualif	ed		1	
						06/15/1994				
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		. <del>  -   ''</del>	plied For	
21		26				65-0497523		<del></del>	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certifcate of Status Desired	<sub>3</sub> 🗆	\$8.75 A		
22		27				<u> </u>		Fee Re	<del></del>	
City & State		City & State			_	6. Election Campaign Financia	ng 🔲	\$5.00		
23		28				Trust Fund Contribution Added to Fees				
Zip	Country	Zip Country				8. This corporation owes the current year Intangible  Personal Property Tax				
24	25		30			Personal Property Tax.  10. Name and Address of Ne	w Pagistored			
	9. Name and Address of Currer	it Registered Agent	٠- ا	31 Nam		To. Maine and Address of Ne	w registered	Agent		
COR	PORATE CREATIONS ENTERPR	ISES INC		, Idaiii		,				
4521 PGA BLVD., SUITE 211				32 Stree	et Addres	ss (P.O. Box Number is Not Acco	eptable)			
	A BEACH GARDENS FL 33418		ļ.	33		<del></del>				
FALR	DEACH GANDENOTE SOTIO			23						
	•		1	34 City	-			85 Zip (	Code	
					<del>.</del>	4	FL	- I i i i i i i i i i i i i i i i i i i	ragistarad	
11. Pursuant	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607.1508, Florida Statute of Florida Such change was au	s, the abo thorized l	ove-name by the co	ed corpor	ration submits this statement for i's board of directors. I hereby at	tne purpose o scept the appo	ointment as re	gistered	
agent. I a	n familiar with, and accept the obliga	itions of, Section 607.0505, Flori	da Statut	es.		•				
SIGNATURE	•									
	Signature, typed or printed name of registered age		Registered A	gent signatu	v beriupen er	when reinstating) ADDITIONS/CHANGES TO	OFFICERS A	ND DIRECTO	RS IN 12	
12.	P OFFICERS AN	ID DIRECTORS	1,1 TITL		1	ADDITIONO/GITANOLO TO	OTTIOLINGT	/ Change	Addition	
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NAME	OLSON, RICHARD F			EET ADDRES	. 2L	FOR SW Be	2784	Creo	le To	
STREET ADDRESS	7901 NE 8TH CT		1		" الم	SC to	37.0	240	92	
CITY-ST-ZIP	BOCA RATON	☐ DELETE	1.4 CITY 2.1 TITL	-ST-ZIP		alm city	1	Clenange	Addition	
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NAME	OLSON, MILDRED W		2.2 NAM		🔨	1107 SU) B	besse	4 Cres	ob Train	
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CITY-ST-ZIP	BOCA RATON FL 33487		_	Y-ST-ZIP	<u> </u>	Pelm City,		Change	7,70	
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STREET ADORESS				EET ADDRES	SS				]	
CITY-ST-ZIP			6.4 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 changed, or on an attachment with an address, with all other like empowered.