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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

1999

## OCUMENT # P94000058164

RFF, INC.

## **FILED** May 10, 1999 8:00 am Secretary of State

05-10-1999 90209 008 \*\*\*150.00



rincipal Place	of Business	Mailing Address		-	
00 N. OCEAN	or. Tower	4100 N. OCEAN DR. APT. 2202, WEST TOWER SHIGER ISLAND FL 33404	APT. 2202, WEST TOWER		DO NOT WRITE IN THIS SPACE
NGER ISLAND FL 33404 SHYGER ISLAND FL 33404					3. Date Incorporated or Qualifed
					08/10/1994
. Principal Place of Business 2a. Mailing Address			dress		4. FEI Number Applied For
}		26			65-0565655   Not Applicable   \$8.75 Additional
Suite, Apt. #	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
·1		27			\$5.00 May 5
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
		28	Zip Country		8. This corporation owes the current year Intangible
Zip 1	Country	·	[30]		Personal Property Tax. Yes ZiNo
	25 9. Name and Address of Curre				10. Name and Address of New Registered Agent
g. Name and Address of Content to g				81 Name	FRASCO, LINDA
FRASCO, ROBERT F				82 Street	Address (P.O. Box Number is Not Acceptable)
4100 N. OCEAN DR.				4	160 AL CORP DE
APT.	2202, WEST TOWER			83 A	PT. 2202, WEST TOWER
SINGER ISLAND FL 33404				84 City	85 Zip Code
					to the state of th
office or re agent. I ar	to the provisions of Sections 607.05 ogistered agent, or both, in the State of familiar with, and accept the oblig	602 and 607,1508, Florida Statute e of Florida, Such change was at rations of, Section 607,0505, Flor	s, the e thorized Ida Stat	bove-named I by the corpo utes.	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered
SIGNATURE,	maa	Trasco	Registerer	Agent signature /	(equired when reinstating) DATE
	Signature typed or printed name of registered	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
2.		DELETE	1,17	TLE	DP5 Change Addition
ITLE	DPS FRASCO, ROBERT F	•	1.2 N	AME	NANCY FRASCO, EXECUTOR THE ESTATE OF HOBELT F. FRASCO
AME	RESS 4100 N. OCEAN DR., APT. 2202, WEST TOWER		1.3 S	TREET ADDRESS	THE ESTATO OF HODGE T. TANKE
TREET ADORESS			140	ITY-\$1-2P	479 RR 17
ITY-ST-ZIP	SINGEN IOC AND TE GOTO!	OELETE	2.1 T	TLE	MAHWAN, NJ 07430 Change Addition
			2.2 6	ME	
AME			2.3 9	TREET ADDRESS	
TREET ADDRESS			2.4	CITY-ST-ZIP	Co Dadilion
ITY-ST-ZIP		OELETE	311	ITLE-	Change Addition
AME		:		IAME	
TREET ADDRESS			1	TREET ADDRESS	5
HTY-ST-ZIP				CITY-ST-ZIP	Change Addition
ITLE		☐ DELETE		TITLE	
ME			•	NAME	·
TREET ADDRESS				STREET ADDRESS	*
ITY-ST-ZP		[] oc. 575		CITY-ST-ZIP	Change Addition
THE DELETE				ritle Name	]
LAME				STREET ADDRESS	s
TREET ADDRESS				STREET ADDRESS CITY-ST-ZIP	
ITY-ST-ZIP		[7] DELETE	_	TITLE	☐ Change ☐ Addition
TITLE		☐ £ £ F E	•	NAME	
VAME				STREET ADDRES	38
STREET ADDRESS	5		6.4	CITY-ST-ZIP	

14. I hereby certify that the information supplied with this fling does not qualify for the examption 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.

SIGNATURE: