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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS P94000060812 (2) **DOCUMENT #**

RITE HOME, INC.

Principal Place of Business

Mailing Address

6808 NW 33 TERRACE

6808 NW 33 TERRACE



FI LAUDERU	ALE FL 33309	FT LAUDERDALE FL 33	309				
					 Date Incorporated or Qualified 08/15/1994 	3a. Date of Last R 07/25/19	
 Principal Pla 6808 N_e 	ice of Business W.39 Terrace	2a. Mailing Address 26 6808 N. W. 337 Eprac C.		4. FEI Number Applied For 65-0514838 Not Applied		Applied For Not Applicable	
Suite, Apt. #	*******	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional Required	
City & State 23 Fort Fac	udedale Florida 9 25 Broward	City & State 28 For thaudera	Wet	Torida	6. Election Carripaign Financing Trust Fund Contribution	1 1	May Be d to Fees
24 8376	9 9 25 Broward	Zip 3 3 3 3 0 9	30 Rr	word	8. This corporation has liability for in Florida Statutes X Yes	itangible tax under s	
	9. Name and Address of Current	Registered Agent	13412//		10. Name and Address of New Re		
			8	1 Name			
BARTOLOME, ELMO V 6808 NW 33 TERRACE: FT LAUDERDALE FL 33309 63				0 1 1 1 1	Street Address (P.O. Box Number is Not Acceptable)		
				Street Add	ress (m.o. box number is not Acceptable	əj	
				3			
			8	4 City		FI 85 Z	ρ Code
or registere	o the provisions of Sections 607.0502 and agent, or both in the State of Floridan, and accept the obligations of, Section	Such change was authorize	s, the above d by the cor	-named corpo poration's boa	ration submits this statement for the purp and of directors. I hereby accept the appo	ose of changing its r	registered office Lagent. Lam
SIGNATURE	Signature, typed or printed name of registered agon ar	o title if applicable (NO)	E: Registered Ag	ont signature receive	od when renstating:	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	RS IN 12
TITLE	D	DELETE	1. 1 TITL	1	Y	☐ Change	Addition
NAME.	LEFEBVRE, PHILIP W		1.2 NAME				
STREET ADDRESS	6808 NW 33 TERRACE		13 STRE	ET ADDRESS			
CHY ST ZIP	FT LAUDERDALE FL		1.4 CITY				
TITLE	D	□ DEFEAF	2 1 TITLE			Change	☐ Addition
NAME	BARTOLOME, ELMO V		2 2 NAMI	1			
STHEEL ADDRESS	6808 NW 33 TERRACE FT LAUDERDALE FL 33309			ET ADORESS			
C+TY - ST - Z+P TITLE	FI DAUDENDALE FL 33309	□ DELETE	2 4 CITY			F1 0	ET agence.
NAME		DEFLIC	3 1 7(1)			Change	☐ Addition
STREET ADDRESS			3.2 NAME	EL ADORESS			l
CITY - ST - ZIP							l
lile.		DELFTE	3.4 CITY -			Change	☐ Add-tion
NAME		<u></u>	4.2 NAME			one-igo	
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP			4.4 CITY				
TITLE		DELETE	5 1 TITLE			☐ Change	Addition
NAME			5 2 NAME				
STREET ADDRESS			5 3 STRE	1 ADDRESS			
C(I)Y+S1+Z(P			5.4 CiTY-	ST-ZIP			
TITLE		☐ DELFTE	6 1 TITUE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STRE	T ADDRESS			
CITY - ST-ZIP			6.4 CITY				
14. I do hereby	certify that the information supplied wit	th this filing is voluntarily furnis	shed and do	es not qualify f	for the exemption stated in Section 119.0	7(3)(k), Florida Statut	es. I further

comy that the information indicated on this arithmetic port or supplemental arithmetic port is true and accurate and that my signature shall have the same legal effect as if made under oally, 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.