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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000070735 (3)

RETAIL INVESTMENT CORP. INC.

Principal Place of Business

Mailing Address

C/O 215 S. OLIVE AVENUE WEST PALM BEACH FL 33401-5686 C/O 215 S. OLIVE AVENUE WEST PALM BEACH FL 3340

FILED Feb 24 1997 8:00am Secretary of State



WEST PALM BI	EACH FL 33401-5686	WEST PALM BEACH FL 3340	1		
				3. Date Incorporated or Qualified 09/26/1994	3a. Date of Last Report 03/04/1996
	lace of Business	2a. Mailing Address	A E T E	4. FEI Number	Applied For
	450 S. Australian Ave		3313	65-0530024	Not Applicable
Suite, Apt	#, G IG.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
	Palm Beach, FL	28 West Palm Be		Trust Fund Contribution	Added to Fees
Zip	Country	7ip 33402-3515	Country U.S.A.	8. This corporation has liability for in	
₂₄ 3340:	[49]	[27]	0 U.S.A.		Yes No
	9. Name and Address of Current	X	81 Name	10. Name and Address of New Reg	Jistered Agent
	IT FEDERAL OF THE PALM BEAC	THES	1	st Bank of Florida	
	OLIVE AVE.		82 Street Address (P.O. Box Number is Not Acceptable) 450 S. Australian Avenue		
WES	ST PALM BEACH FL 33401		83	5. Australian Avenue	
			84 City		FL 85 Zip Code
44 6		2 CO2 4CO2 F1- 14- C1-44-	Wes	t Palm Beach	
office or I	registered agent, or both, in the State	of Florida. Such change was au	thorized by the corpora	poration submits this statement for the p tion's board of directors. I hereby accep	t the appointment as registered
agent. La	im familiar with and according the obliga-				
SIGNATURE	et Julius, Typed or printed name of registered ager	John C. T	rammel, Seni Registered Agent signature requi	or Vice President	2/14/97
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	DAVIS, LOUIS O JR.		1.2 NAME		- ,
STREET ADDRESS	127 THORNTON DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	PALM BEACH GARDENS FL 33	418	1.4 CiTY-ST-ZIP		
TIFLE	PD	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	GROTON, RITA K		2.2 NAME	•	
STREET ADDRESS	7894 BLAIRWOOD CIR. SOUTH		2 3 STREET ADDRESS	•	
C(1Y+S1-2)P	LAKE WORTH FL 33467-1808		2. 4 CITY+ST-ZIP		
TITLE	VD	DELETE	3.1 TITLE		Change Addition
NAME	RUDY, JOHN		3.2 NAME		
STREE! ADDRESS	1975 PARKSIDE CIR. SOUTH		3.3 STREET ADDRESS		
OIY-ST-ZIP	LAKE WORTH FL 33467-1808		3.4. CITY-ST-ZIP		
To LE	D	DELETE	4,1 TITLE		Change Addition
NAME	GUEMPLE, R. RANDY		4, 2 NAME		
STREET ADDRESS	1559 GRANTHAM DRIVE		4.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL 33414		4.4 CITY-ST-7IP		
TITLE	S	DELETE	5.1 TITLE		Change Addition
NAME	TRAMMEL, JOHN C		5.2 NAME	•	
STREET ADDRESS	6405 INDIAN WELLS BLVD.		5.3 STREET ADDRESS		
C(TY - S1 - Z(F)	BOYNTON BEACH FL 33437		5.4 CITY-ST-ZIP		
TILE		☐ DELETE	6.1 TITLE		Change Addition
NAM:			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - S1 - ZIP			6.4 CITY-ST-ZIP		

14. I do 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.

SIGNATURE

ENATURE AND TYPED ON PRINTED NAME OF BIONING OFFICER OR DIRECTOR

2/14/97 Daytime Prioric #