


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

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May 01 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P94000077067 (4)</b>					
1. Corporation Name <b>R.P.M. OF CENTRAL FLORIDA, INC.</b>					
Principal Place of Business <b>839 NORTH ORLANDO AVE. WINTER PARK FL 32789</b>			Mailing Address <b>839 NORTH ORLANDO AVE. WINTER PARK FL 32789-2821</b>		
2. Principal Place of Business <b>6039 Linneal Beach Dr. Apopka, Fla. 32703</b>		2a. Mailing Address <b>6039 Linneal Beach Dr. Apopka, Fla. 32703</b>		3. Date Incorporated or Qualified <b>10/20/1994</b>	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.		3a. Date of Last Report <b>09/09/1996</b>	
22. City & State		27. City & State		4. FEI Number <b>58-2844403</b>	
23. Zip		28. Zip		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
24. Country		29. Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
25. Country		30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent <b>NANUS, FRED CPA 4819 SHORELINE CIRCLE SANFORD FL 32771</b>				10. Name and Address of New Registered Agent	
				81. Name	
				82. Street Address (P.O. Box Number is Not Acceptable)	
				83.	
				84. City	
				85. Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1. TITLE <b>PVP</b> <input checked="" type="checkbox"/> DELETE					
2. NAME <b>MITTEMAN, JOEL</b>					
3. STREET ADDRESS <b>1301 PLEASANT OAK LN.</b>					
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