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

P**RO**FIT CORP**O**RATION ANNUAL REPORT

1998



LLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9500000680 (5)

R.L.H. SERVICES, INC.

## FILED Jun 29 1998 8:00am Secretary of State

	there :	OLITTOL	o, mo.										
Principal Place of Business					Mailing Address								
2517 NW 36TH ST				251	2517 NW 36TH ST								
BOCA RATON FL 33434					BOCA RATON FL 33434				1	DO NOT WRI	re in Thic	: CDACE	
									⊢	3. Date Incorporated or Qualified		OFAUL	
										01/04/1995			
2. Principal Place of Business					2a. Mailing Address					4. FEI Number		A	pplied For
21				26	26					65-0544781		N	ot Applicable
Sulto, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional
22			27									beniupel	
City & State				l 1	City & State					<ol><li>Élection Campaign Financing Trust Fund Contribution</li></ol>			May Be to Fees
23	Zip	Country			ip Country					8. This corporation owes or has a			
24	•	[25]			•	30				Personal Property Tax due Jur			∏ No
		9. Name and Address of Current							1	0. Name and Address of New F	legistered	Agent	
HOLMES, ROBERT L						B1 1							
2517 NW 36TH ST BOCA RATON FL 33434							82	Street	Address	Address (P.O. Box Number is Not Acceptable)			<del></del> ,
							83						
							63						
							84	City			FL	<b>85</b> Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statute								-named	corporat	tion submits this statement for the	purpose (	of changing i	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 agent. Lam familiar with land accept the obligations of, Section 607.0505, Florida Statules.												pointment as	: registered
SIG	NATURE									· · · · · · · · · · · · · · · · · · ·			
12.		Signature type	OCLOCE	sotages not the 4 SIAND DIRECT		O11 flagisler		nt e-gnature	e required wi	nen reinstaling) ADDITIONS/CHANGES TO OFF	DATE ICERS AN	ID DIBECTO	RS IN 12
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CITY	- ST - Z1P		/- /- <del></del>			6.40	CITY-SI	· ZIP	L				

14. Thereby 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated in Section 119.07(3)(ii), Florida Statutes. I further certified in Section 119.07(3)(iii), Flor

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