


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

FILED

Feb 09 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P95000039368 (2)**

1. Corporation Name

**RION HOLDINGS INTERNATIONAL, INC.**



Principal Place of Business <b>7515 PELICAN BAY BLVD. #208 NAPLES FL 34108</b>	Mailing Address <b>7515 PELICAN BAY BLVD. #208 NAPLES FL 34108</b>
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <b>1256 Grand Isle Ct</b>	2a. Mailing Address <b>1256 Grand Isle Court</b>
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State <b>Naples, FL</b>	27 City & State <b>Naples, FL</b>
23 Zip <b>34108</b>	29 Zip <b>34108</b>
25 Country <b>USA</b>	30 Country <b>USA</b>

3. Date Incorporated or Qualified <b>05/18/1995</b>
4. FEI Number <b>65-0712361</b>
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

<b>g. Name and Address of Current Registered Agent</b> <b>WEINBERGER, MARION</b> <b>7515 PELICAN BAY BLVD. #208</b> <b>NAPLES FL 34108</b>	<b>10. Name and Address of New Registered Agent</b> <table border="1"> <tr> <td>81 Name</td> <td><b>Weinberger, Marion</b></td> </tr> <tr> <td>82 Street Address (P.O. Box Number is Not Acceptable)</td> <td><b>1256 Grand Isle Court</b></td> </tr> <tr> <td>83</td> <td></td> </tr> <tr> <td>84 City</td> <td><b>Naples</b></td> </tr> <tr> <td>85 State</td> <td><b>FL</b></td> </tr> <tr> <td>86 Zip Code</td> <td><b>34108</b></td> </tr> </table>	81 Name	<b>Weinberger, Marion</b>	82 Street Address (P.O. Box Number is Not Acceptable)	<b>1256 Grand Isle Court</b>	83		84 City	<b>Naples</b>	85 State	<b>FL</b>	86 Zip Code	<b>34108</b>
81 Name	<b>Weinberger, Marion</b>												
82 Street Address (P.O. Box Number is Not Acceptable)	<b>1256 Grand Isle Court</b>												
83													
84 City	<b>Naples</b>												
85 State	<b>FL</b>												
86 Zip Code	<b>34108</b>												

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 *M. Weinberger* *M. Weinberger* *Jan 28/98*

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>Weinberger, Marion</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WEINBERGER, MARION L</b>	1.2 NAME	<b>1256 Grand Isle Court</b>
STREET ADDRESS	<b>7515 PELICAN BAY BLVD. #208</b>	1.3 STREET ADDRESS	<b>Naples, FL 34108</b>
CITY-ST-ZIP	<b>NAPLES FL 34108</b>	1.4 CITY-ST-ZIP	<b>Naples, FL 34108</b>
TITLE	<b>D</b> <input type="checkbox"/> DELETE	2.1 TITLE	<b>Weinberger, Eric</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WEINBERGER, ERIC</b>	2.2 NAME	<b>1256 Grand Isle Court</b>
STREET ADDRESS	<b>7515 PELICAN BAY BLVD. #208</b>	2.3 STREET ADDRESS	<b>Naples, FL 34108</b>
CITY-ST-ZIP	<b>NAPLES FL 34108</b>	2.4 CITY-ST-ZIP	<b>Naples, FL 34108</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 as an attachment with an address.

*M. Weinberger* *Jan 28/98*

CR2E034 (10/97)