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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000048193 (3) **DOCUMENT #** 

RND DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

**FILED** Mar 21 1996 8:00 am Secretary of State

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1101 NORTH SUITE 400 MAITLAND F	H LAKE DESTINY DRIVE FL 92751	1101 NORTH LAKE DI SUITE 400 MAITLAND FL 32751	estiny drive	Date incorporated or Qualified     O6/19/1995	3a. Date of Last Report			
2. Principal Place	ce of Business  WYMORE ROAD	2a. Mailing Address 26 /O/ WYMO	RE ROAD	4. FEI Number 59 - 333722	Applied For Not Applicable			
21 / <b>O</b> / Suite, Apt. #		Suite, Apt. #, etc.	RB KUND	5. Certificate of Status Desired	\$8.75 Additional			
22 SUIT			500		7 - Tee Heduned			
City & State  23 ALTAM	DNIE SPRINGS, FL	City & State  28 ALTAMONTO		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
<sup>Zip</sup> 32.7	Country 25 USA	29 327/4	Country USA	8. This corporation has liability for in Florida Statutes  Yes	~			
24 00-1	9. Name and Address of Current		1001	10. Name and Address of New R	egistered Agent			
			81 Name	SOM MATZOUL	q			
1101 N SUITE	IIDICE, FRED IORTH LAKE DESTINY DRIVE 400 AND FL 32751		83	SAM MATZOUL dress (P.O. Box Number is Not Acceptable WYMORE ROAD,	SUITE 500			
	,		84 City	MONTE SPRINGS	FL 85 Zip Code			
11. Pursuant to or registere familiar with	o the provisions of Seguens 607.00 02 a ad agent, or both <del>y in the State of F</del> orida h, and accept the obligations of, Sectio	ind 607.1508, Florida Statute I, Such change was authorize n 607. <del>050</del> 5, Florida Statutes.	s, the above-named corporation's book	pration submits this statement for the pur and of directors. I hereby accept the appo	oose of changing its registered office intment as registered agent. I am			
SIGNATURE		· /	E: Registered Agent signature requir	Ma	rch 5, 1996			
12.	Sgrayen vpayrarg of month egisterap pental	S MIEHL	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTORS IN 12			
TITLE	D	☐ DELETE	1 1 TITLE		Change Addition			
NAME	DELGUIDICE, FRED		1.2 NAME	A WINDOWS ONAN	SOUTE SOO			
STREET ADDRESS	1101 N. LAKE DESTINY DRIV	Æ #400	1.3 STREET ADDRESS	101 WYMOREROAD, SUITE 500 ALTAMONTE SPRINGS, FL 32714				
CITY - \$1 - ZIP	MAITLAND FL 32751	D DEFETE	1.4 CITY - ST - ZIP	LTAMONIE SPRINGS, P	Change Addition			
TITLE		☐ DELETE	2. 1 TITLE 2.2 NAME	SAM MAJZOUB	Change Autocom			
NAME CARGET APPRECE			2.3 STREET ADDRESS	D D MAJZOUB SAM MAJZOUB OI WYMORE ROAD	, SUITE SOO			
STREET ADDRESS CITY-ST-ZIP				LTAMONTE SPRINGS				
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on energy certify that the information supplies with this liting is voluntarily furnished and does not quality for the exemption stated in Section 119.07(5)(k), Florida Statutes. Turther 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 inchanged, or on an attachment with an address.

\*\*March 5, 1996\*\* (407) 774-0707\*\*

\*\*March 5, 1996\*\*\*

\*\*Warch 5, 1996\*\*\*

\*\*Turther certify that the information indicated on this 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 inchanged, or on an attachment with an address.

\*\*March 5, 1996\*\*\*

\*\*Comparison of the corporation of the corporation of 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 inchapter 607.

**SIGNATURE:** 

Narch 5, 1996 (407) 774-0707
Daytonic Phone #