

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

112

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000073594 (0)
1. Corporation Name

ROBERT CHARLES DISTRIBUTING INC.

Principal Place of Business	Mailing Address
7040 WEST PALMETTO PARK RD. SUITE 263 BOCA RATON FL 33433	7040 WEST PALMETTO PARK RD. SUITE 263 BOCA RATON FL 33433

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/22/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0613699	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ALLEN, ROBERT
7040 WEST PALMETTO PARK RD
SUITE 263
BOCA RATON FL 33433

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 _____ (Signature typed and 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	PSD <input type="checkbox"/> DELETE	11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, ROBERT	12 NAME	600002619426--0
STREET ADDRESS	7040 WEST PALMETTO PARK RD.	13 STREET ADDRESS	-08/19/98--01003--001
CITY-ST-ZIP	BOCA RATON FL 33433	14 CITY-ST-ZIP	****150.00 ****150.00
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY-ST-ZIP		24 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY-ST-ZIP		34 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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, changed or on an attachment with an address.

SIGNATURE  ROBERT ALLEN

4/21/98

(954) 422-5675

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)

212

Member
Florida Institute of
Certified Public Accountants

Richard M. Bogdanoff, P.A.
Certified Public Accountant

Member
American Institute of
Certified Public Accountants

July 21, 1998

Florida Division Of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

RE: Robert Charles Distributing, Inc.
Document No. P95000073594
1998 Florida Corporation Annual Report

Gentlemen:

At the request of my client, I am writing you on their behalf. Please be advised that the Robert Charles Distributing, Inc. timely filed and mailed their 1998 Florida Corporation Annual Report on April 21, 1998 and remitted the \$150.00 filing fee. Only upon receipt of the 2nd Notice from the Florida Department of State was it noted that the check was currently outstanding on their bank reconciliation.

Accordingly, enclosed is a copy of the timely filed 1998 Florida Corporation Annual Report and a replacement check no. 2540 dated July 21, 1998 for the check no. 2327 dated April 21, 1998 originally submitted. A copy of the Company's April check register is enclosed indicating check no. 2327 was paid to the Florida Department of State for their 1998 Corporation Annual Report Filing Fee sent with the signed report.

Please contact me or the taxpayer should you require any additional information.

Very truly yours,

Richard M. Bogdanoff, CPA

Richard M. Bogdanoff

Enc.

cc: Mr. Robert Allen, President
Robert Charles Distributing, Inc.