

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

FILED
Jun 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000085938 (5)

1. Corporation Name:

RHINO CONSTRUCTION, INC.



Principal Place of Business

Mailing Address

502 W HILDA DR
SUITE 109
BRANDON FL 33510
US

502 W HILDA DR
SUITE 109
BRANDON FL 33510
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/08/1995

4. FEI Number

59-3342438

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

21 4041-MARITIME BLVD.

Suite, Apt. #, etc.

22

City & State

23 TAMPA, FLA.

Zip

24 33605

Country

25 U.S.A.

2a. Mailing Address

26 4041-MARITIME BLVD.

Suite, Apt. #, etc.

27

City & State

28 TAMPA, FLA.

Zip

29 33605

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

ALDRIDGE SR, PAUL M
502 W HILDA DR
BRANDON FL 33510

10. Name and Address of New Registered Agent

81 Name

PAUL M. ALDRIDGE, SR.

82 Street Address (P.O. Box Number is Not Acceptable)

4041-MARITIME BLVD.

83

84 City

TAMPA

FL

85 Zip Code

33605

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

Paul M. Aldridge, Sr.

PAUL M. ALDRIDGE, SR.

4/30/98

Signature type: For print, name of registered agent is acceptable

(7-011) Registered Agent's signature required when reappointing

DAY

12. OFFICERS AND DIRECTORS

TITLE P
NAME ALDRIDGE, PAUL M SR.
STREET ADDRESS 502 W. HILDA DRIVE
CITY-ST-ZIP BRANDON FL ☐ DELETE

TITLE S
NAME ALDRIDGE, SANDRA L
STREET ADDRESS 502 W. HILDA DRIVE
CITY-ST-ZIP BRANDON FL ☐ DELETE

TITLE V
NAME ALDRIDGE, PAUL M JR.
STREET ADDRESS 502 W. HILDA DRIVE
CITY-ST-ZIP BRANDON FL ☐ DELETE

TITLE T
NAME BROWN, ALLISON M
STREET ADDRESS 17 BELMONT DR
CITY-ST-ZIP HOCKESSIN DE ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME
13 STREET ADDRESS 4041-MARITIME BLVD.
14 CITY-ST-ZIP TAMPA, FLA. 33605

21 TITLE ☒ Change ☐ Addition
22 NAME
23 STREET ADDRESS 2421-N. VALRICO RD.
24 CITY-ST-ZIP SEFFNER, FLA. 33584

31 TITLE ☒ Change ☐ Addition
32 NAME
33 STREET ADDRESS 2421-N. VALRICO RD.
34 CITY-ST-ZIP SEFFNER, FLA. 33584

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
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 if changed, or in an attachment with an address.

SIGNATURE

Paul M. Aldridge, Sr.

PAUL M. ALDRIDGE, SR.

4/30/98

(813) 247-1419

CR2E034 (10/97)