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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000086150 (6)

RTR ENTERPRISES, INC.

FILED Feb 28 1997 8:00am Secretary of State



Principal Place of Business 9344 TALWAY CIRCLE BOYNTON BEACH FL 33437		Mailing Address 9344 TALWAY CIRCLE BOYNTON BEACH FL 33437-2712) kallstagt nie johel bilts agris genit belit reies feinz dithe woor ginn gen noor			
Principal Place of Business Total		28. Mailing Address 26				4, FEI Number 65-0624832	Applied For Not Applicable		
Suite, Apt #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional equired
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be
23 Zip	Country 28	Zip	Cou	intry		Trust Fund Contribution 8. This corporation has flability for	intensible		to Fees
24 25	29		30				Yes [5, 189.Q3Z,
	Address of Current Regis	tered Agent				10. Name and Address of New R	gistered .	Agent	
REICHENBACHER,				81	Name				
9344 TALWAY CIRCLE BOYNTON BEACH FL 33437				62	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
BOTHTON BEACH	FL 30437			83					
				84	City		F*1	85 Zip	Code
44 Durament to the provisions	of Sections 607 0502 and 60	07 1509 Florida Statu	toe the a	bout	named nor	poration submits this statement for the	FL	hanaina i	te ragistared
office or registered agent.	or both, in the State of Floric nd accept the obligations of	la. Such change was	authorize	d by	the corpora	tion's board of directors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	, ,								
	ned name of registered agent and tile OFFICERS AND DIREC			d Age	nt signature requi	red when reinstating)	DATE	DIDECTO	20 11 10
12. THE D	OFFICENS AND DINEC	DELETE	13.	TLF.		ADDITIONS/CHANGES TO OFFI	JENS ANL	Change	Addition
	CHER, DIETMAR		1.2 N					– •	
STREET ADDRESS 9344 TALWAY CIR			1.3 STREET AD		ADDRESS				
CITY-ST-ZIP BOYNTON B	EACH FL 33437		1.40	ITY-S	T-21P				
TITLE D		DELETE	2 1 TI	TLE				☐ Change	Addition
NAME THURM, MAI			22N	AME	ļ .				
STREET ADDRESS 162 UNCATE WORCESTER					ADDRESS		ř		
TITLE D	I MIA U I DUO	DELETE	2 4 C		ST - ZIP			Change	Addition
NAME RILEY, STEP	HEN D	F" DECEME	3.2 N		}			C) change	- noditon
	NG DOVE DR				ADDRESS				
	OWN RI 02874				ST-ZIP				
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NAME			4.2	IAME					
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CITY - ST - ZIP TITLE		DELETE	617		I T ZIF			Change	Addition
NAME			6.2 N					- •	
STREET ADDRESS					ADDRESS				
CITY-ST-7#P			- 1		T-2#P				

14. Ido 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 on an attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/97 56/265/800