**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000093511

REH SOUTH II, INC.

Mailing Address		
1333 MONTEREY BLVD NE St. Petersburg Fl 33704		

## **FILED** Mar 25, 1999 8:00 am Secretary of State

03-25-1999 90054 002 \*\*\*300.00



ST. PETERSBURG FL 33704 ST. PETERSBURG FL 33704					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 01/01/1996			
2. Principal Place of Business	2a. Mailing Ad	dress			4. FEI Number	Applied For		
21	26	26			57-1035337	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt.	#, etc.	•		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & Stat	City & State			6. Election Campaign Financing  Trust Fund Contribution   \$5.00  Added to			
Zip Country 24 25	Zip 29	Zip Cou			This corporation owes the current year Int Personal Property Tax.	angible □Yes □No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent		
HOME DAIDHE			81	Name				
howe, ralph e 1333 monterey blvd., ne					Street Address (P.O. Box Number is Not Acceptable)			
ST. PETERSBURG FL 33704	•		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 Statutés.										
SIGNATURE	Signature, typed or printed name of registered agent and title if a	nnicable (NOTE: F	Registered Agent signature re	guired when reinstating)	DATE					
12.	OFFICERS AND DIREC	· · · · · · · · · · · · · · · · · · ·	13.		ANGES TO OFFICERS	AND DIRECTO	RS IN 12			
TITLE	P	□ DELETE	1.1 TITLE			☐ Change	☐ Addition			
NAME	HOWE, RALPH		1.2 NAME							
STREET ADDRESS	1333 MONTEREY BLVD. N.E.		1.3 STREET ADDRESS							
CITY-ST-ZIP	ST. PETERSBURG FL 33704		1.4 CITY+ST-ZIP							
TITLE		☐ DELETE	2.1 TITLE			☐ Change	☐ Addition			
NAME			2.2 NAME							
STREET ADDRESS		<u>.</u>	2.3 STREET ADDRESS	والمراز ومستست	يسر ويلس د					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP							
TITLE		☐ DELETE	3.1 TITLE		•	☐ Change	Addition			
NAME			3.2 NAME							
STREET ADDRESS			3.3 STREET ADDRESS							
CITY-ST-ZIP			3.4. CITY-ST-ZIP							
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition			
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET ADDRESS				·			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				<b>—</b>			
TITLE		☐ DELETE	5.1 TMLE			Change	☐ Addition			
NAME			5.2 NAME		,					
STREET ADDRESS			5.3 STREET ADDRESS							
CITY-ST-ZIP			5.4 CITY+ST+ZIP							
TITLE :	BIFFERM WIFF COME	☐ DELETE	6.1 TITLE			Change	Addition			
NAME , 3	The stant of the stan		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 on an attachment with an address, with all other like empowered.

SIGNATURE: