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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

P9600003906 (0) DOCUMENT #

R & N HOLDINGS, INC.

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 355 SHERWOOD AVENUE 355 SHERWOOD AVENUE SATELLITE BEACH FL 32837 SATELLITE BEACH FL 32937 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 01/09/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 21 26 59-3369841 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Zιρ Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 30 Personal Property Tax due June 30. ☐ Yes ☐ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PINTA, RONALD J 355 SHERWOOD AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SATELLITE BEACH FL 32937 83 84 City Zip Code 85 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 or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. PTD DELETE Change Addition 11 THUE TITLE PINTA, RONALD J NAME 1.2 NAME 355 SHERWOOD AVENUE STREET ADDRESS 1.3 STREET ADDRESS SATELLITE BEACH FL 32937 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 1111.6 PINTA, NOREEN J BU NUT NAME 2.2 NAME **35**5 SHERWOOD AVENUE STREET ADDRESS DELETE 2.3 STREET ADDRESS **SATELLITE BEACH FL 32937** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Addition TITI F 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME **6.3 STREET ADDRESS** STREET ADDRESS CITY-ST-7IP 64 CITY-ST-7IP

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. 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 changes, or on an attachingtent with an address.