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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000019379 (2)

RSF SUPPLY, INC.

Principal Place of Business

Mailing Address

## FILED Jun 17 1997 8:00am Secretary of State



3501 DEL PRADO BLVD STE 207 CAPE OORAL FL 33904		3501 DEL PRADO BLVD STE 207 CAPE CORAL FL 33904-7211			
				3. Date Incorporated or Qualified 02/29/1996	3a. Date of Last Report
2. Principal Place of Business 2a. Mailing Add		2a. Mailing Address		4. FEI Number	Applied For
in the contract of the contrac		26	<u> </u>	65-064733	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & State		City & State		Fee Required	
23		28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip '	Country	7ip	Country	8. This corporation has liability for in	
24	25	29	30		Yes No
	9. Name and Address of Curre			10. Name and Address of New Reg	Istered Agent
FAR	GO, STEPHEN S		81 Name	Ruckael 4 Fra	
3501 DEL PRADO BLVD STE 207			82 Street A	ddress (P.O. Box Number is Not Ascentati	.70
CAPE CORAL FL 33904			82 Street Address (P.O. Box Number is Not properties) Blvd Sk 27		
			83	Char C.	c1
4	an Ear		<b>84</b> City	Coffee Carsi	FL 85 3370 F
11 Purcuant	to the province of Sections 607 05	O2 and 607 1508 Florida Statut	as the above named of	cornoration submits this statement for the n	runner of changing its registered
office or re	egistered agent, or both, in the Sta	te of Florida. Such change was a	authorized by the come	corporation submits this statement for the proration's board of directors. I horeby accep	t the appointment as registered
agent. I ai	im familia with, and accept the ob-	gations of, Section 607.0505, Fig	orioa Statutes.		1/1/97
SIGNATURE	Signature, typed or printed name of registered a	igent of title if applicable (NOTI	F : Registereo Agent signature re	equired when reinstaling)	- Garage
12.		ND DIRECTORS	<b>1</b> 13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	1.1 TITLE	<u> </u>	Change Addition
NAME	FARGO, STEPHEN S		1.2 NAME		
STREET ADDRESS	3501 DEL PRADO BLVD STE	207	1.3 STREET ADDRESS		
CITY-ST-ZIP	CAPE CORAL FL 33904		1.4 CITY - ST - ZIP		
TITLE	V\$D	☐ DELETE	21 TillE	PRES, SAC, TREAS,	Change Addition
NAME	FARGO, RACHAEL M		2.2 NAME	FARGO, RACLON	
STREET ADDRESS	3501 DEL PRADO BLVD STE	207	2.3 STREET ADDRESS	"SAME AZONSS	
CITY-ST-ZIP	CAPE CORAL FL 33904		2. 4 CITY - ST - ZIP		
TITLE		☐ DEFELÉ	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
NĄME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
गार्स		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	1		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 THLE		☐ Change ☐ Addition
TITLE NAME		☐ DELETE			☐ Change ☐ Addition
		☐ DELETE	6.1 THLE		Change Addition

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.

NONATURE CONTROL

(94) 440 858