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 # P96000025434 (7)

RETSOF, INC.

Principal Place of Business
2580 PALM LAKE DRIVE

Mailing Address

2590 PALM LAKE DRIVE MERRITT ISLAND FL 32952-5474

FILED Jan 16 1997 8:00am Secretary of State



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							03/18/199		3a. Da	te of Last R	eport
	lace of Business	2a. N	Aailing Address				4. FEI Number			Ap	plied For
21 5/	7 m E	26	51 M	E			59-31	372750		No.	t Applicable
Suite, Apt	# etc	27	Suite, Apt. #, etc.				5. Certificate of	of Status Desired		\$8.75 / Fee Re	
City & State	0		City & State				6. Election Car	mpaign Financing		\$5.00	May Be
23		28					Trust Fund (Contribution		Added	
Zip	Country	7	'ıp	c	Country		B. This corpora	ation has liability for			199.032,
24	25	29		30			Florida Stati		Yes [<u> </u>
	9. Name and Address of Curre	nt Registe	red Agent				10. Name and	Address of New Re	gistered /	Agent	
FOS	ter, kent m				81	Name		,			
2590) PALM LAKE DRIVE				82	Street A	ddress (P.O. Box Nun	nber is Not Accepta	ble)		
MER	RITT ISLAND FL 32952										
					83						
					84	City				85 Zip (Code
					644	City			FL	Da Zip	Code
11. Pursuant	to the pravisions of Sections 607.05	02 and 607	7.1508, Florida Sta	atules, the	above	-named o	corporation submits th	s statement for the I	ourpose of	changing if	s registered
office or r	registered agent, or both, in the Stat im familiar with, and accept the oblig	e of Florida	i. Such change wi Section 607.0505	ras authori	ized by	the corpo	oration's board of dire	ctors. I hereby acce	pt the app	ointment as	registered
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SIGNATURE	Signature, typed or printed have of registered as	gen la dible di	application (1	(NOTE Regist	lered Agen	it signature re	equired when reinstaling)		DATE		
12.	OFFICERS AT				3.	<u>-</u> -		CHANGES TO OFFI	CERS AND	DIRECTOR	IS IN 12
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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: MUN MI KO

MYRNA W. FOST

1/7/97

407-452-1602