

4-27-98 B-5678-C

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

FILED

Apr 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000026195 (3)

1. Corporation Name

RITEWELL COMMERCIAL SERVICES CORPORATION

Principal Place of Business

3901 SOUTH STATE ROAD 7  
DAVE FL 33314

Mailing Address

3901 SOUTH STATE ROAD 7  
DAVE FL 33314

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

30 Country

3. Date Incorporated or Qualified

03/19/1996

4. FEI Number

65-0650898

Applied For

Not Applicable

6. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required

8. Election Campaign Financing

☐\$5.00 May Be  
Added to Fees8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SIDHU, AMARJIT  
3001 SOUTH STATE ROAD 7  
DAVE FL 33314

10. Name and Address of New Registered Agent

81 Name	DAVID Northcutt
82 Street Address (P.O. Box Number is Not Acceptable)	3901 S State Rd 7
83	10960 NW 28th ST
84 City	Surprise
85 Zip Code	FL 33322

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

DAVID Northcutt

DAVID Northcutt

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PVST	<input checked="" type="checkbox"/> DELETE
NAME	SIDHU, AMARJIT	
STREET ADDRESS	3901 SOUTH STATE ROAD 7	
CITY-ST-ZIP	DAVID FL 33314	

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	DAVID Northcutt	
1.3 STREET ADDRESS	3901 S STATE RD 7	
1.4 CITY-ST-ZIP	DAVID FL 33314	

2.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	DAVID Northcutt	
2.3 STREET ADDRESS	3901 S STATE RD 7	
2.4 CITY-ST-ZIP	DAVID FL 33314	

3.1 TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Barbara Rodgers	
3.3 STREET ADDRESS	22429 SW 66th Ave	
3.4 CITY-ST-ZIP	BOCA RATON, FL 33428	

4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		

5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		

6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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

SIGNATURE:

DAVID Northcutt

4/15/98

CR2E034 (10/97)