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

DOCUMENT # P96000031926 (4)

RUSH-RITE COMMERCIAL EQUIPMENT, INC. Mailing Address Principal Place of Business 8077-OAGA-DEL-GOL-CIR. 3077 CASADEL SUL CIR DO NOT WRITE IN THIS SPACE CLEARWATER FL 04821 **CLEARWATER FL 34621** 3. Date Incorporated or Qualified 04/11/1996 4. FEI Number Applied For 2. Principal Place of Business 2s. Mailing Address 1807 OAK FUREST DE.S. 65-0657459 68th STREET I Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible USA Personal Property Tax due June 30. 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered BENEDICT, ROBERT L JR. -8077-CASA DEL SOL CIR. APT. 102-**CLEARWATER FL: 34021** provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered red 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 with and accept the obligators of, Section 607.0505, Florida Statutes. 11, Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change __ DELETE 1.1 TITLE TITLE BENEDICT, ROBERT L JR. 1.2 NAME NAME 9077 GAGA DEL SOL CIR. APT-102 1.3 STREET ADDRESS STREET ADDRESS **OLEARWATER** FL 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 2 1 TITLE TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change ☐ Addition 3.1 TITLE TITLE 3.2 NAME NAME **33 STREET ADDRESS** STREET ADORESS 3 4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4 1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 61 TITLE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

CICNIATURE.

CITY-ST-ZIP

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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

1/98 813-541-0013

FILED

Mar 11 1998 8:00am

Secretary of State