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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

 Secretary of State DIVISION OF CORPORATIONS

1997

P96000032010

DOCUMENT #

FILED Apr 23 1997 8:00am Secretary of State

RK ENTERPRISES OF CLEARWATER, INC.				c.	
Principal Piac	e of Busmess	Mailing Address			
4851	DEER LODGE	RAAN			
	PONT RICHEY, F				
NEW	TOTAL MONEY	34655	***	3. Date Incorporated or Qualified	3a. Date of Last Report
2. Prinopal F	lace of Business	2a. Mailing Address		3-29-96 4. FEI Number	Applied For
21		26		59-3368820	Not Applicable
Suite, Apt.	#1.656	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22[Oity & Stat	le	City & State		6, Election Campaign Financing	Fee Required
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	9. Name and Address of Curren		30]	Florida Statutes 10. Name and Address of New Re	Yes No
41	A		81 Name		Indeed Agent
NICK CAMPANALE YRSI DEER LOBGE ROAD NEW PONT RICHEY, FLORIDA 83 84 STEEL Address 83 84 STEEL ADDRESS 83 84 STEEL ADDRESS 84 STEEL ADDRESS 85 87 STEEL ADDRESS 87 STEEL ADDRESS 88 STEEL ADDRESS STEE				t Address (P.O. Box Number is Not Acceptab	10)
485	1 DEER LODG	se koad		Tradition (1. O. Day Halling) in Not Accoptab	
AIE.	1 PONT RICHEY	FLORISA	83		
1000	o release received	34655	- 84 City	17 MTT, 4-1 MT	85 Zip Code
11. Pursuant	to the provisions of Sections 607.050			d corporation submits this statement for the p	
office or r	registered agent, or both, in the State or familiar with, and accept the obligi	of Florida. Such change was a	uthorized by the co	rporation's board of directors. Thereby accept	t the appointment as registered
SIGNATURE	Minit Common		nou olulotos.		4/6/97
				re required when reinstating)	DATE
12. 1	VICE-Presidenticens and	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12 Grange Addition
NAM:			1.2 NAME	VICE PRESIDENT	
STREET ADDRESS			1.2 CTOSET ADDOCCO		Change Addition
00 Y - ST - Z IF	NEW PONT KILLIE	4, FUA 30655	1 4 CITY-ST-ZIP		
T-Ti.§	EDUANS D. RI	BIA HE DELETE	2.1 TITLE	President	Change Addition C
NAM ₅	5710 HIRLINIA	AUR	22 NAME		
\$1REE1 ADDRESS	NEW PONT RICH	WIND PHIM	2.3 STREET ADDRESS		ļ
C IY+SI+ZIP Talif	104-12 TOM VICINI	DELETE	2 4 DTY - ST - ZIP 3 1 TITLE		Change Addition
NAM			3.2 NAME		
STREET ACREESE			3.3 STREET ADDRESS		
C 14 - 51 74P			3.4. CITY-ST-ZIP		······
THUE		☐ DELETE	4 1 TITLE		Change Addition
NAME Class LARVED III			4 2 NAME		}
SERVET ADDRESS. OUT ST 79			4.3 STREET ADDRESS		A # 1
III:		DELETE	5.1 TIFLE		Change Addition
MANA			5.2 NAME		M. Hazlar
512:11:01:19:55			5 3 STREET ADDRESS		471 412219 A
(if v. Sl. 7)	The second section of the	T p.c. Pyc	5.4 CITY - ST - 2IP		
10.6 110.6		L_) DELETE	6 1 TITLE	90000215	440 Adoition
ISM Shelt MORES I			6.2 NAME 6.3 STREETLADDRESS	-04/25/970100	14028
CHY 51 71			6.4 CITY-ST-ZIP	80000215 -04/25/970100 ***165.00	
14. I do heed	by certify that the information supplier	d with this filing does not qualify	for the exemption	stated in Section 119.07(3)(i). Florida Statutes	s. I further certify that the
information in dicated on this attribute port or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that have an objective or 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 manged, or on an apachment with an address.					
appears i	in Breck 12 or Block 13 if manged or	r on an machment with an addi	ress.	11/1/2	(813)(818)
SIGNATURE: / List (
	SIGNATURE AND TYPED OF	PRINTED NAME OF SIGNING OFFICER	OR DIRECTOR	Date	Daytine Phone #