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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 21 1997 8:00am Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

SIGNATURE:

DOCUMENT # P9600037909 (4) 1. Corporation Name RHONE AND SMITH ENTERPRISES, INC.											
Principal Place of Business 2140 21ST AVENUE. NORTH ST. PETERSBURG FL 33713		Mailing	Mailing Address 2140 21ST AVENUE, NORTH ST. PETERSBURG FL 33713-4955			I COUNTY SEE COUNTY BEEN DOUG	eniti dalli di	0189 TILL 188	(\$ (\$)() B\$()	(41) 1841	
							 Date Incorporated or Qu 04/29/1996 	alified	3a. Date	of Last R	eport
~n `	lace of Busin	oss	 	ling Address			4. FELNumber	201			plied For
Suite Apt #, etc		26	Suite, Apt. #, etc.			27-23/6	59-3376 90/ Not Ap				
2	π, Cιο		27	o, mpc #, ptc.			5. Certificate of Status Des	ired			equired
City & Stat	e			& State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Fina	ncing		\$5.00	May Be
3	.		28				Trust Fund Contribution		<u> </u>		to Fees
Zip T	ļ	Country	Zip		Country	У	8. This corporation has liab		tangible ta Yes		. 199.032,
4		≥5 and Address of Curi	29 rent Registered	Agent	30]		Florida Statutes 10. Name and Address of				
RHC	NE, RUDY /				81	Name					
		NUE, NORTH			82	Street Ad	Idress (P.O. Box Number is Not A	ccentable	<u></u>		
ST.	PETERSBUR	G FL 33713							· ·		
					63						
					84	City		· · · · · · · · · · · · · · · · · · ·		85 Zip	Code
									<u> </u>		n registered
11. Pursuant	to the provision	ons of Sections 607.0	502 and 607.15	08, Florida Stati	utes, the abov	e-named co	orporation submits this statement	for the pur	rpose of c	hanging il	sa registeradi.
11. Pursuant office or agent La SIGNATURE							orporation submits this statement ration's board of directors. I hereb	for the pur by accept		nanging it ntment as	registered
SIGNATURE		y printed name of registered		icable (No			orporation submits this statement ration's board of directors. I here! guired when reinstating) ADDITIONS/CHANGES T		DATE		
SIGNATURE	Signature lyseed	y printed name of registered OFFICERS A	agent and tile if appli	icable (No	OTE Registered Ag		quired when reinstating)		DATE IRS AND D		IS IN 12
SIGNATURE 12.	PO RHONE, R	y printed name of registered OFFICERS A	agert and tille if appli AND DIRECTOR	icable (NC	OTE Registered Ag		quired when reinstating)		DATE IRS AND D	DIRECTOR	IS IN 12
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