

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

FILED

Mar 07 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000039641 (1)

1. Corporation Name
R.C. LEATHER, INC.

Principal Place of Business
150 OCEAN LANE DR.
#20
KEY BISCAYNE FL 33149

Mailing Address
150 OCEAN LANE DR.
#20
KEY BISCAYNE FL 33149-1416



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/08/1996	3a. Date of Last Report
21 328 CRANDOW Blvd	26 328 CRANDOW Blvd	4. FEI Number 65-0666019		Applied For Not Applicable	
22 Suite 226	27 Suite 226	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Key BISCAYNE, FL	28 Key BISCAYNE FL	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 33149	29 33149	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CORTINEZ, DOMINGO E 150 OCEAN LANE DR. #20 KEY BISCAYNE FL 33149		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	

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 is authorized by the corporation's board of directors, hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Domingo Cortinez (NOTE: Registered Agent signature required when reinstating) DATE 12/31/96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REQUEIRA, GUSTAVO	1.2 NAME	
STREET ADDRESS	150 OCEAN LANE DR. #20	1.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33149	1.4 CITY-ST-ZIP	Key BISCAYNE FL 33149
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CORTINEZ, DOMINGO	2.2 NAME	
STREET ADDRESS	150 OCEAN LANE DR. #20	2.3 STREET ADDRESS	
CITY-ST-ZIP	KEY LARGO FL 33149	2.4 CITY-ST-ZIP	Key BISCAYNE FL 33149
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	100002107271
STREET ADDRESS		5.3 STREET ADDRESS	-03/07/97--01005--048
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***165.00
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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: Domingo Cortinez DATE: 12/31/96