## 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 # **P96000043951** (8)

## FILED Apr 20 1998 8:00am Secretary of State

i 1. Corporatio	RUCKING, INC.	Mailing Address							
2221 SE RAINER RD 2221 SE RAINER RD					Ī				
PT ST LUCIE FL 34952 PT ST LUCIE FL 34952						DO NOT WRITE IN THIS SPACE			
ì					}	3. Date Incorporated or Qualified	E IN THIS	SPAUL	
ļ					1	05/17/1996			
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		TA	optied For
21 26						65-0677871			lot Applicable
Suite Ant # etc   Suite Ant #, etc.						5. Certificate of Status Desired		\$8.75	Additional
22		27				6. Certificate of Status Desired	لیے	Fee R	Required
City & Stat	to	City & State				6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cour	try	1	8. This corporation owes or has p			ntangible No
24	25 9. Name and Address of Curre	29 29 Annut	30			Personal Property Tax due June 0. Name and Address of New Re	+-	<u> </u>	
CC	DROORAN, PATRICK S	ant riegistores rigant		1 Name		D. Italia alta Addigos of How It	- Statolou	- Agricia	
2221 SE RAINER RD									
PT ST LUCIE FL 34952				32 Street	Address	(P.O. Box Number is Not Accepta	ble)		[
, ,			la la	33					
			Ĺ				<del></del>		
			- ['	City			FL	85 Zip	Code
11. Pursuant office or ragent. La	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with, and accept the obli	02 and 607.1508, Florida Statut te of Florida. Such change was a gations of, Section 607.0505, Flo	es, the about outhorized orida Statu	ove-named by the corr tes.	corporation's	ion submits this statement for the sboard of directors. I hereby acce	purpose o pt the ap	of changing in pointment as	its registered s registered
	Signature, typed or printed name of registered a			Agent signature	e required wi		DATE		
12.	OFFICERS A	ND DIRECTORS	13.		т —	ADDITIONS/CHANGES TO OFFI	CERS AN		
TITLE	CORCORAN, PATRIK	☐ DELETE		1.1 TITLE				Change	☐ Addition
NAME	2221 SE RAINER RD		1	1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS	PT ST LUCIE FL								1
CITY-ST-ZIP	S	DELETE		-ST-ZIP	<del> </del>			Change	Addition
TITLE	CORCORAN, TRACIE J.	L. Deterie	2.1 1111					L_1 change	L Addition
NAME	2221 SE RAINER RD		2.2 NAN						
STREET ADDRESS	PT ST LUCIE FL			ET ADDRESS	j				
CITY - ST - ZIP TITLE	7.01.0012.12	☐ DELETE	2. 4 CIF	Y-ST-ZIP	ļ		<del></del>	Change	Addition
NAME			3.2 NAN		}				
STREET ADDRESS	22		1	3.3 STREET ADDRESS					J
CITY-ST-ZIP				-ST-ZIP	1				
TITLE		DELETE	4.1 T(TL		1			Change	Addition
NAME			4. 2 NA	<b>A</b> E				_	J
STREET ADDRESS			4.3 STR	ET ADDRESS	}				<b>\</b>
CITY-ST-ZIP			4.4 CITY	-ST-ZIP	j				
TITLE		DELETE		5.1 TITLE				Change	☐ Addition
NAME			5.2 NAM	E					1
STREET ADDRESS			5.3 STRI	ET ADDRESS					ļ
CITY-ST-ZIP				-ST-ZIP	1				1
TITLE		DELETE	6.1 T/TL					Change	Addition
NAME			6.2 NAM	E					1
STREET ADDRESS			6.3 STRI	ET ADDRESS					1
CITY - ST - ZIP		101		- ST - ZIP	<u></u>				
14. I hereby o	certify that the information supplied	with his film dows not qualify to	r the exer	ption state	ed in Sec	tion 119.07(3)(i), Florida Statutes. I	further o	ertify that the	a information

4. Thereby certify that the information supplied with his filed, does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informatio indicated on this annual report of supplemental fundably for the 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 type of empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changing, or on all attachment with an addition.

SIGNATURE

3.20.98

561-398-9722