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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P96000057757**1. Corporation Name

RAPPAHANNOCK EQUITY GROUP, INC.

Principal Place of Business

Mailing Address

FILED Feb 23, 1999 8:00 am Secretary of State

02-23-1999 90108 001 ***150.00



3228 SW MARTIN DOWNS BLVD PALM CITY FL 34990		3228 SW MARTIN DOWNS BLVD PALM CITY FL 34990		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qualifed			
		1.30	N. Y. Addison		07/02/1996 4. FEI Number		lied For	
2. Principal Place of Business 21. 3501 CORPORATE RWY 22. Mailing Address 23. Mailing Address 24. Mailing Address			ATE DUNG				Applicable	
Suite, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	dditional	
22 27							:	
23 ALM	City FLORIDA	28 PALM CITY			6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to		
Zip 24 3496	Zip 29 34990 3	Zip Country 34990 30		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No				
24 3490 25 29 34990 30 9. Name and Address of Current Registered Agent					10. Name and Address of New Registere	ad Agent		
	5. Name and Address of Current	Registered Agent	81	Name	To the total of th	<u> </u>		
SOPKO, JAMES								
2307 SE MONTEREY RD STUART FL 34996				82 Street Address (P.O. Box Number is Not Acceptable)				
			83	83				
			84	City		L 85 Zip C		
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	f Florida. Such change was auti	nonzea ov	the como	corporation submits this statement for the purpose oration's board of directors. I hereby accept the ap	of changing its r pointment as reg	egistered istered	
SIGNATURE		APATE D		-t -iab	equired when reinstating) DATE			
40	organism, types of participation and the same of the s			stered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
12.		DELETE	1.1 TITLE		ABBITIONO CONTROLO TO CONTROLO	Change	Addition	
TITLE	OP EDEDEDICK C		1.2 NAME		,	••		
NAME STREET ADDRESS	MESARD, FREDERICK C ss 3228 SW MARTIN DOWNS BLVD			TADDRESS	2 KOL POR BOTO STE PAR	on del		
CITY-ST-ZIP	DALLA OFFICE CONTRACTOR			T-ZIP	3501 CORPORATE PHEN PALM CITY, FLORIDA	34990) .	
TITLE			2.1 TITLE		77	☐ Change	☐ Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	TADDRESS				
CITY-ST-ZIP	2.4		2. 4 CITY-5	ST-ZIP				
TITLE	☐ DELETE 3.1		3.1 TITLE			☐ Change	☐ Addition	
NAME			3.2 NAME				İ	
STREET ADDRESS			3.3 STREE	TADDRESS			ļ	
CITY-ST-ZIP			3.4, CITY-5	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition {	
NAME			4. 2 NAME			•		
STREET ADDRESS			4.3 STREE	TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
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NAME			5.2 NAME				ţ	
STREET ADDRESS				TADDRESS			ĺ	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			□ Addisor	
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME				į	
STREET ADDRESS			6.3 STREE	TADDRESS			1	
CODY OT ZID			B 4 CITY-S	T-7IP	1		,	

14. I hereby certify that the information supplied with this indicated on this annual report or supplemental annual officer or director of the corporation or the receiver of Block 12 or Block 13 if changed, or on an annual report. fing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information a eport is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE: