

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000070691**
Corporation Name

RETTGER RESORTS OF FLORIDA, INC.

FILED
Sep 09, 1999 8:00 am
Secretary of State

09-09-1999 90005 020 ***550.00



Principal Place of Business Mailing Address
0 N.E. 20TH TERRACE 100 N.E. 20TH TERRACE
DEERFIELD BEACH FL 33441 DEERFIELD BEACH FL 33441

DO NOT WRITE IN THIS SPACE

| | | | | | |
|---|--|---------------------|--|---|--|
| Principal Place of Business | | 2a. Mailing Address | | 3. Date Incorporated or Qualified 08/26/1996 | |
| Suite, Apt. #, etc. - | | Suite, Apt. #, etc. | | 4. FEI Number 65-0696263 | |
| City & State | | City & State | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| Zip | | Zip | | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| Country | | Country | | 8. This corporation owes the current year Intangible Personal Property. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | |
| WILLIAM D. BEAMER, P.A. 1290 EAST OAKLAND PARK BLVD. SUITE 101 FT. LAUDERDALE FL 33334 | | | | 81 Name | |
| | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | |
| | | | | 83 | |
| | | | | 84 City FL 85 Zip Code | |

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

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

| OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|-------------------------------------|--|--|--|
| E IE EET ADDRESS (-ST-ZIP) | D RETTGER, HARRY C 100 N.E. 20TH TERRACE DEERFIELD BEACH FL 33441 <input type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| E IE EET ADDRESS (-ST-ZIP) | AS RETTGER, SHEILA 100 N.E. 20TH TERRACE DEERFIELD BCH FL <input checked="" type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | AS Rettger, Stephanie 100 N.E. 20th Terrace Deerfield Beach, FL 33441 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| E IE EET ADDRESS (-ST-ZIP) | <input type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| E IE EET ADDRESS (-ST-ZIP) | <input type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| E IE EET ADDRESS (-ST-ZIP) | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| E IE EET ADDRESS (-ST-ZIP) | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

I 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:

Stephanie Rettger

8/27/99

954-427-7900

CR2E034 (5/99)