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

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90284 043 ***150.00

DOCUMENT # P96000082653	
RUBYSTOCK HOLDING CORP.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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Principal Place of Business	Mailing Address		1 19011001 110 10110 01111 00111 00111 00111	
2131 PALM VISTA DRIVE	2131 PALM VISTA DRIVE			
APOPKA FL 32712	APOPKA FL 32712		DO NOT WRITE IN TH	S SPACE
			3. Date ir corporated or Qualifed	3 SPACE
			10/03/1996	
2. Principa Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26	· · · · · · · · · · · · · · · · · · ·	59-3527742	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Recuired
22	27			
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be Added to Fees
23	28	Country	Trust Fund Contribution	
Zip Country	Zip	30	8. This corporation owes the current year: Personal Property Tax.	ntangible ☐Yes IX io
24 25		30]	10. Name and Address of New Registere	
9. Name and Address of Curren	redistated What	81 Name	Hallo and Hadisas of Hall Hagistere	
MENDEZ-MILLS, CARLOS				
2131 PALM VISTA DRIVE		82 Street Acd	ress (P.O. Box Number is Not Acceptable)	
APOPKA FL 32712		83		
		84 City	F	85 Zip Code
4 2 (507.00	/	no the should named as so	possion submits this statement for the purpose	of changing its ragistered
11. Pursuant to tile provisions of Stations 607,050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga-	2 and 607.1508, Florida Statuti ▼f Florida, Sach change was ∋	es, the above-named ccrp uthorized by the corporati	on's board of cirectors. I hereby accept the app	ointment as reg stered
agent. I am familiar with, and accept the obliga-	tans of, Section 607.0505, Flor	rida Statutes.	-10170	1aa
SIGNATUFE	/ /		TATE OF THE PARTY	<i> </i>
Signature, typed or printed name at registers seen 12. OFFICES AN	It and title if appliquote (NO) :	Registered Agent signature require	ADDITIONS/CHANGES TO OFFICERS	ND DIRECTORS IN 12
TITLE P	DELETE	1.1 TITLE	ADDITION OF THE CITY OF THE CITY	☐ Change ☐ Addition
HENDEZ MILLO OADLOO	<u> </u>	1.2 NAME		
ALOJ BALLILIOTE DOUG		1.3 STREET ADDRESS		
1				
CITY-ST-ZIP APOPKA FL 32712		1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE	L'i Decere			
NAME		22 NAME		
STREET ADDRESS		2.3 STREET ADDRESS		
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NAME		3.2 NAME		ĺ
STREET ADORE SS		3.3 STREET ADDRESS		
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	☐ DELETE	4.1 TITLE 4.2 NAME		☐ Change ☐ Addition
TITLE	☐ OELETE	4.1 TITLE		☐ Change ☐ Addition
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indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made unider oath; that I am an officer or director of the corporation or the receiver of true compowered 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 attacl prent with an address, with all other like empowered.

SIGNATURE: __