## 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 # P96000087223 (9)

RCF DISTRIBUTORS, INC.

## **FILED** Apr 16 1998 8:00am Secretary of State



Dringingt Plac	o of Duniungs	Mailing Address				- 1 1031/201 110 10111 0111/ 431// 0011/ 4011/	OBIBI HANN NADIO I			
Principal Place of Business Mailing Address  9850 SANDALFOOT BLVD STE 454  9850 SANDALFOOT BLVD STE 454										
BOCA RATON		9650 SANDALFOOT BLV BOCA RATON FL 33428	9850 SANDALFOOT BLVD STE 454							
00011 1211011	112 33,23	COON INTON TE GOZE				DO NOT WRITE II	N THIS SPACE	-		
						3. Date Incorporated or Qualified				
						10/21/1996				
<u> </u>	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26				65-0702528	Not Applicable			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		_	Additional	
22 City & State		27 City # Chate					<del></del>		periupe	
23 City & State	U	<b>⊢</b>	City & State			6. Election Campaign Financing \$5.00 May Be				
Zip	<b>[28]</b> Zip	Country			Trust Fund Contribution Added to Fees					
24	<del> </del>	; Country Zip Co			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No					
[27]	9. Name and Address of Curre	1771	30			10. Name and Address of New Regi			S NO	
ED/	ANK, RICHARD K			81	Name					
	906 WINDING CREEK LANE		-			10.0				
1 .	CA RATON FL 33428		82 Street Addre			ss (P.O. Box Number is Not Acceptable	)			
	07.131101112		-	83			-			
			Ĺ							
				84	City		FL 85	Zip (	Code	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statu	tes, the ab	OVE	-named corpo	ration submits this statement for the pur		aina it	s registered	
office or fo	egistered agent, or both, in the State m familiar with, and accept the oblid	e of Florida. Such change was	authorized Iorida Stati	by	the corporation	oration submits this statement for the pur on's board of directors. I hereby accept	the appointme	nt as	registered	
	and decopy the cons	ganoris of, bootion oor boos, r	onou ototo	1100.	•					
SIGNATURE.	Signature, typed or printed name of registerial ag	cot and title if applicable (NO	E Registered	Agen	nt signature required	d when reinstating)	DATE			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIRE	CTOR	S IN 12	
TITLE	D	DELETE	1.1 100	LE			☐ Ci	ange	Addition	
NAME	FRANK, RICHARD K		1.2 NA	ME						
STREET ADDRESS	10906 WINDING CREEK LAN	IE	1.3 STF	REET A	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33428			1.4 CITY - ST - ZIP						
TITLE	D	DELETE	2.1 TIT	LΕ	i		☐ Ct	ange	Addition	
NAME	MULLINEAUX, CAROL A		2.2 NA	2.2 NAME						
STREET ADDRESS	10906 WINDING CREEK LAN	lt	2.3 STR	REET #	ADDRESS					
CITY-ST-ZIP	BOCA RATON FL 33428		2. 4 CIT		T - ZIP					
TITLE		DELETE	3.1 TITO				☐ Ch	ange	☐ Addition	
NAME			3.2 NA							
STREET ADDRESS					ADDRESS					
CITY-S1-ZIP		DELETE	3.4. C/T		T - ZIP		[T] A.		1.000	
TITLE			4.1 TITU				☐ Ch	ange	Addition	
NAME			4. 2 NA							
STHEET ADDRESS					ADDRESS				]	
CITY-ST-ZIP		DELETE	4.4 C(T)		- ZIP		□ ch		Addition	
NAME			5.1 THE				i cr	iai iye	☐ Addition	
STREET ADDRESS			5.2 NAM		ADDOCCC					
<b> </b>					ADDRESS					
CHY ST ZIP		DELETE	5.4 CIT		-202		☐ Ch	2000	Addition	
NAME		beat	6.2 NAM					- INC	Addition	
STREET ADDRESS					ADDRESS					
CITY ST. ZIP			6.3 STH		l l					

14. 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.