

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

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PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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57 SEP 25 AM 8:37
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P96000097627 (9)
 1. Corporation Name
RUBENESQUE INC.



Principal Place of Business 6618 US HWY. 19 NEW PORT RICHEY FL 34652	Mailing Address POST OFFICE BOX 3124 HOLIDAY FL 34690
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24 25	29 30

3. Date Incorporated or Qualified 11/27/1996	3a. Date of Last Report
4. FEI Number 593411284	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**FERRARO, JIMMY
4335 TIBURON DRIVE
NEW PORT RICHEY FL 34655**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. 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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	D <input type="checkbox"/> DELETE
NAME	FERRARO, JIMMY
STREET ADDRESS	4335 TIBURON DRIVE
CITY-ST-ZIP	NEW PORT RICHEY FL 34655
TITLE	D <input type="checkbox"/> DELETE
NAME	FERRARO, DEE ETTA
STREET ADDRESS	4335 TIBURON DRIVE
CITY-ST-ZIP	NEW PORT RICHEY FL 34655
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	Secretary <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	200002306932 <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	-09/29/97--01188--001
3.3 STREET ADDRESS	****165.00 ****165.00
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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.

CR2E034 (4/97)

Handwritten signature/initials

(2)

Rubenesque Inc.

Tuesday, August 12, 1997

Division of Corporations
Annual Reports Section
P.O. Box 1500
Tallahassee FL 32302-1500

Re: Filing of 1997 Annual Report

Dear Sir or Madam;

I am in receipt of the 2nd notice for the filing of the 1997 Profit Corporation Annual Report which was a total surprise.

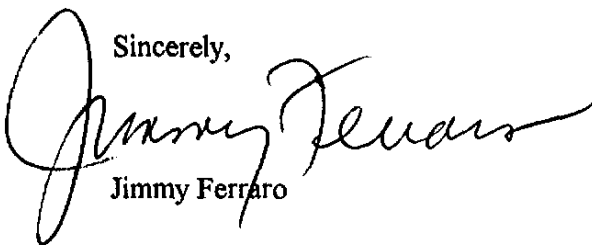
I never received the 1st report which I understand you start sending in January. Perhaps as I was incorporated November 27, 1997 and received that notification near the end of December, there was a mishap in mailing me the first 1997 Annual Report package. I don't know, however, I honestly never received it and did not even realize that I should have been looking for it.

Enclosed is my check for \$165.00 which I would have paid with the original report had I received it.

I will be looking for my report for 1998, you can be sure.

Thank you.

Sincerely,



Jimmy Ferraro

(813) 846-0408
6618 U.S. Hwy 19
New Port Richey FL 34652