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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000009986 (5) DOCUMENT # 1. Corporation Name

RIN ENTERPRISES, INC.

Principal Place of Business

INDEE STACES IN

Mailing Address

LODGE CTACEY LAS

FILED Apr 29 1998 8:00am Secretary of State



BOCA RATON		BOCA RATON FL 33428			
			DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualified	
<u> </u>				01/27/1997	
2. Principal Pi	ace of Business 15 State Rd 7	2a. Mailing Address	RANBROOK Rd	4. FEI Number	Applied For
21 2277 Suite, Apt.		+ ' ·····	KHNUKUOK KA	65-072-5611	Not Applicable
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28 BOCA RA	TON. FL	6. Election Campaign Financing	\$5.00 May Be
23 <u>Bock</u> Zip	4 RATON, FL	28 BOCAKA	Country I L	Trust Fund Contribution	Added to Fees
24 ²⁴ 33 y	128 25 W. Palm Boh		Country 30 W. Palm Box	8. This corporation owes or has paid the co	
24 22 7	g. Name and Address of Current		10 W. Talm Ca	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
444004 (LDIVO					
MASSA, ILDIKO					
Ozi Otreet Address (F.O. Box Number is Not Acceptable)					
BOCA RATON FL 33428					
			84 City A	ORA RATON FI	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 Forida. 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, Porida Statutes.					
$1 \qquad \qquad 10 P \cdot R \cdot 100 \qquad Y \qquad \qquad 1 \forall \qquad \qquad 1 4 \qquad 1 10 \qquad 1$					
SIGNATURE	Sponture, typed a printed name of registered agent		Registered Agent signature requir	red when reinstaling) DATE	20/98
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	DELETE	1,1 TITLE		
NAME	Massa, ildiko		1.2 NAME	MASSA, ILDIKO	
STREET ADDRESS	10855 STACEY LN		1.3 STREET ADDRESS	22231 CRANBROOK	Rd ,
CITY-ST-ZIP	BOCA RATON FL 33428		1.4 CITY-ST-ZIP	PRESIDENT MASSA, ILBIKO 22231 CRANBROOK BOCA Raton, FL.	33428
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · ·	2.4 CITY-ST-ZIP		
ŢITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		Decemen	4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		D Ohaman D 4499
TITLE		☐ DETEIE	6.1 TITLE		L Change L Addition
NAME CTREET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
14. hereby ce	rtify that the information sumplied with	this filing does not qualify for	6.4 City-St-ZiP	Section 119 07/3(i) Florida Statutas 14 other a	artifu that the information
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 office or distribution the same legal effect as if made under oath; that I am an office or distribution the same legal effect as if made under oath; that I am an office or distribution the same legal effect as if made under oath; that I am an office or distribution the same legal effect as if made under oath; that I am an office or distribution is 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on the same legal effect as if made under oath; that I am an office of the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the sam					
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 it changed, or on all attachment with an address.					