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

**PROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000015198 (9)

**RSM PUBLICATIONS, INC.** 

Principal Place of Business

Mailing Address

## **FILED** Apr 21 1998 8:00am Secretary of State



2940 SOUTH TAMIAMI TRAIL SARASOTA FL 34239 SARASOTA FL 34239		DO NOT WRITE IN THIS  3. Date Incorporated or Qualified	SPACE		
				02/13/1997	
2. Principal Place of Business 21 164 SARASOTA CENTEL GU	2a. Mailing Address  164 SARAS	OTA CE	UTER BLA	4 FFI Number	Applied For Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5, Certificate of Status Desired	\$8.75 Additional Fee Required
23 SACUSORA, FL	Cip. & State 28 SARAS OTA,	FL		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country 25 25	29 34240	Country 30			Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered	Agent
JUDU, STEVEN II					
SARASOTA FL 34239		82 83	Street Addre	ess (P.O. Box Number is Not Acceptable)	
		64	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 Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE					
12. OF LICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS ANI	
TITLE D	DELETE	1.1 TITLE			Change Addition
NAME JUDD, STEVEN H		1.2 NAME			
STREET ADDRESS 2940 SOUTH TAMIAMI TRAIL		1.3 STREET	1		ļį
CITY-ST-ZIP SARASOTA FL 34239	DELETE	1.4 CITY - S 2.1 TITLE	T-ZIP		☐ Change
NAME	1_1 Detert	2.1 HILE 2.2 NAME	P	.11 44	C cliaritic Marketini
STREET ADDRESS		2.2 NAME	NO RO	wald invaria 14 Sarasota Center Biv	ند
CITY-ST-ZIP		2 4 CHY-	1 1	ALASOM GL 34240	٠,
TITLE	DELETE	3.1 TITEF	31-24	ARADIN, PH STOTO	Change Addition
NAME	<del></del>	3.2 NAME			
STREET ADDRESS		3.3 STREET	ADDRESS		
CITY-ST-ZIP		3.4. CITY- 5	ST - ZIP		
TITLE	DELFTE	4.1 TITLE			☐ Change ☐ Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREE1	ADDRESS		
CITY-ST-ZIP		4.4 CITY - S	1 - ZIP		
TITLE	☐ DELETE	5.1 THILE			☐ Change ☐ Addition
NAME		5.2 NAME	ľ		
STREET ADDRESS		5.3 STREET	ADDRESS		
CITY-ST-ZIP		5 4 CITY - S	T-71P		
TITLE	[] DELETE	61 TITLE			Change Addition
NAME		62 NAME			
STREET ADDRESS		63 STREET	ADDRESS		
CITY-ST-ZIP  14. I hereby certify that the information supplied with	this filters does not ought. to	6.4 CiTY-S		Coction 110 07/2Vi) Florida Ctatulas I further as	artific 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 chapter 6, or on an attachment with an address.

RON MARTIN