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 #

P97000053506 (6)

RINC CORP.

Principal Place of Business

SIGNATURE: 2

Mailing Address

FILED May 11 1998 8:00am Secretary of State



117 N 21ST AVE P O BOX 22-3637 HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/16/1997 4. FEI Number 65-0777341 2s. Mailing Address 2. Principal Place of Business Applied For 1506 HOLLYWOOD BLVD Not Applicable 21 Suite, Apt. #, etc. Suite, Apt #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State 8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 Added to Fees HOLLYWOOD, Country Zip Country Zip 8. This corporation owes or has paid the current year Intengible Yes 33020 USA Personal Property Tax due June 30. 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name KATSIOURAS, IOANNIS 1610 NE 3RD CT #7 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33301 84 City Zip Code 85 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) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. **K** Addition Change DELETE 1.1 TITLE TITLE LAURA L. PRENTICE 1.2 NAME NAME 1506 HOLLYWOOD BLVD. STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD, FL 33020 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 31 TITLE TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE 4, 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 51 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME STREET ADDRESS **6 3 STREET ADDRESS** 6.4 CITY-ST-ZIP 14. Thereby certify that the information supplied with this fill indicated on this annual report or supplemental annual officer or director of the corporation the reguler of the Block 12 or Block 13 if changed at an indication of the corporation. ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information exort is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an active empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in