

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

**FILED**  
**Apr 30 1998 8:00am**  
**Secretary of State**

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>		<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** P 970 000 727 97  
1. Corporation Name  
R. N. S., INC.

<b>Principal Place of Business</b> 3505 S. Ocean Drive Suite 721 HOLLYWOOD, FL 33019	<b>Mailing Address</b> 3505 S. Ocean Drive Suite 721 HOLLYWOOD, FL 33019
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DO NOT WRITE IN THIS SPACE

<b>2. Principal Place of Business</b> 21 3505 S. Ocean Drive Suite, Apt. #, etc. 22 721 City & State 23 HOLLYWOOD, FL Zip 24 33019 Country 25 USA	<b>2a. Mailing Address</b> 26 3505 S. Ocean Drive Suite, Apt. #, etc. 27 721 City & State 28 HOLLYWOOD, FL Zip 29 33019 Country 30 USA
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<b>3. Date Incorporated or Qualified</b> 8/22/97	<b>4. FEI Number</b> 59-0776387	Applied For <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	<b>6. Election Campaign Financing Trust Fund Contribution</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	<b>8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**9. Name and Address of Current Registered Agent**

AmeriLawyer  
343 Almeria Avenue  
CORAL GABLES, FL 33134

**10. Name and Address of New Registered Agent**

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

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. OFFICERS AND DIRECTORS	
<b>TITLE</b>	<b>DPST</b> <input checked="" type="checkbox"/> DELETE
<b>NAME</b>	<b>HAUK, FRAUKE</b>
<b>STREET ADDRESS</b>	<b>3505 S. Ocean Drive (721)</b>
<b>CITY-ST-ZIP</b>	<b>HOLLYWOOD, FL 33019</b>
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	
<b>TITLE</b>	<input type="checkbox"/> DELETE
<b>NAME</b>	
<b>STREET ADDRESS</b>	
<b>CITY-ST-ZIP</b>	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
<b>1.1 TITLE</b>	<b>DPS</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
<b>1.2 NAME</b>	<b>HAUK, FRAUKE</b>
<b>1.3 STREET ADDRESS</b>	<b>3505 S. Ocean Drive (721)</b>
<b>1.4 CITY-ST-ZIP</b>	<b>HOLLYWOOD, FL 33019</b>
<b>2.1 TITLE</b>	<b>TREASURER</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
<b>2.2 NAME</b>	<b>GEORGE J. BECK</b>
<b>2.3 STREET ADDRESS</b>	<b>5400 Park Street North (PH-9)</b>
<b>2.4 CITY-ST-ZIP</b>	<b>ST. PETERSBURG, FL 33709</b>
<b>3.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>3.2 NAME</b>	
<b>3.3 STREET ADDRESS</b>	
<b>3.4 CITY-ST-ZIP</b>	
<b>4.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>4.2 NAME</b>	
<b>4.3 STREET ADDRESS</b>	
<b>4.4 CITY-ST-ZIP</b>	
<b>5.1 TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>5.2 NAME</b>	
<b>5.3 STREET ADDRESS</b>	
<b>5.4 CITY-ST-ZIP</b>	
<b>6.1 TITLE</b>	<b>-05/04/98--01022--000</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>6.2 NAME</b>	<b>***150.00</b>
<b>6.3 STREET ADDRESS</b>	
<b>6.4 CITY-ST-ZIP</b>	

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 additional block as address.

**SIGNATURE:** GEORGE J. BECK, TREASURER

**APR 20 1998**

(813) 545 0606