## 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 #

P97000090692 (9)

R & E CIMINO INC

**FILED** May 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						
	ERAL HWY STE 4 ACH FL 33435		BOYNTON BEACH FL 33435			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
······································						10/20/1997
	lace of Business	— ~	2a. Mailing Address			4. FEI Number 6.5-0204976 Applied For
Sulte, Apt	# Alc	26 Suite Apt	Suite, Apt. #, etc.			CO 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State	D	City & Stat	e			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	28 Zip		Counti	rv	Trust Fund Contribution Added to Fees  8. This corporation owes or has paid the current year Intangible
24	25 29 30		¬ ′ ≀		Personal Property Tax due June 30.  Yes No	
	9. Name and Address of Curre	· \				10. Name and Address of New Registered Agent
Cil	AINO, R			8	1 Name	
	00 SO FEDERAL HWY STE 4			8:	2 Street	( Address (P.O. Box Number is Not Acceptable)
ВО	YNTON BEACH FL 33435			8:		
				84	City	<b>■■ 85</b> Zip Code
dd Duraniont	to the presidence of Continue COZ OF	00 and 007 1500 Fl	dala Ctot tan	the aba		FL   St.   Experience   FL   Experience   FL   Experience   FL   Experience   FL   Experience   FL   Experience   FL   Experie
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						
12,	Signature typed or printed name of registered ag OFF ICEBS AN	ID DIRECTORS	[NOTE: I	13.	gent signatur	re required when reinstaing) DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TITLE		Change Addition
NAME	CIMINO, R			1.2 NAME		
STREET ADDRESS	1100 SO FEDERAL HWY STI	E 4		1.3 STREE	ET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435			1.4 CITY-		<u> </u>
TITLE		LJ	DELETE	2.1 TITLE		Change Addition C
NAME				2.2 NAME		
STREET ADDRESS				1	1 ADDRESS	
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY 3.1 TITLE		Change Addition
NAME		LJ	Deleve	3.1 TILLE		C Orange C Rodition
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP				3.4, CITY		
TITLE			DELETE	4.1 TITLE	01 20	Change Addition
NAME				4. 2 NAM	E	
STREET ADDRESS				4.3 STREE	T ADDRESS	
CITY-ST-ZIP				4.4 CITY-	ST-ZIP	
TITLE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREE	T ADDRESS	
CITY-ST-ZIP				5.4 CITY-	ST-ZIP	
TITLE		ليا	DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME		
STREET ADDRESS				I.	T ADDRESS	
CITY-ST-ZIP	artification is down the annual and	into atom dominio di ancioni	ot mucht. for	6.4 CITY-		ded in Costine 100 07/2V/) Florido Clabusa I full as a city that the inter-
14. I nereby c	ænny man me imormation supplied v	viin ture mind does u	or drains tot.	nie exew	puon Bial	ted 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 op an attachment with an address.

SIGNATURE: