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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000024601

FILED Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90274 038 ***150.00

RSH ENTERPRISES, INC.				
				I (181148) 148 FOLDE 1811, BRIN BRIN BRIN BRIN BRIN HOLD HER BIN BRIN BRIN BRIN BRIN BRIN HOLD
Principal Place	e of Business	Mailing Address		T 1 SALLA 1991 1991 1991 1991 1991 1991 1991
4605 NORTH HIGHWAY A-1-A 4605 NORTH HIGHWAY A-1-			-∆	
VERO BEACH FL 32693 VERO BEACH FL 32693			,,	
				DO NOT WRITE IN THIS SPACE
				3. Date Incorporated or Qualifed
				03/16/1998
		2a. Mailing Address		4. FEI Number Applied For
21 26				65-0823905 Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired
		27		Fee Required
L ′		City & State		6. Election Campaign Financing \$5.00 May Be
23		28	0	Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year Intangible Personal Property Tax.
24	25	<u> </u>	30	Personal Property Tax. Li Yes 10. Name and Address of New Registered Agent
	9. Name and Address of Current	Registered Agent	81 Name	to. Name and Address of New Registered Agent
SCHULMAN, ROSEMARIE T				
4605 NORTH HIGHWAY A-1-A			82 Street Add	ress (P.O. Box Number is Not Acceptable)
VERO BEACH FL 32963			83	
			3	
			84 City	FL 85 Zip Code
A4 D A4 A A A A A A A A A A A A A A A A				
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 trib if conjugable (NOTE)	Registered Agent signature requir	red when reinstating) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	STPD	DELETE	11 TITLE	☐ Change ☐ Addition
NAME	SCHULMAN, ROSEMARIE T	\	12 NAME	_ , _
STREET ADDRESS	4605 NORTH HIGHWAY A-1-A		1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32693		1.4 CITY-ST-ZIP	
TITLE	VENO BEACHTE GEGGG	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	range.		2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
			2. 4 CITY-ST-ZIP	
CITY-ST-ZIP TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
				}
CITY-ST-ZIP TITLE		☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Addition
		La Victoria	4. 2 NAME	
NAME				
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	☐ Change ☐ Addition
		C OCCUSE	5.2 NAME	C Oriente Discounting
NAME			5.3 STREET ADDRESS	
STREET ADDRESS			5.4 CITY-ST-ZIP	•
CITY-ST-ZIP		DELETE	6.1 TITLE	☐ Change ☐ Addition
TITLE		₩ DELETE	6.2 NAME	
NAME			6.3 STREET ADDRESS	
STREET ADDRESS			0.3 STREET AUUKESS	•

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 attachment with an address, with all other like empowered.

SIGNATURE: