PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90112 026 ***150.00

DOCUMENT # P98000027794

1. Corporation Name

RICON, INCORPORATED

Principal F	Place of	Business
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1087 PARNELL COURT

Mailing Address

1087 PARNELL COURT **DELTONA FL 32738**



DELTONA FL 32738 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/23/1998 2a. Mailing Address 4 FEI Number Applied For 2. Principal Place of Business 59-3504061 961 Diplomat DC Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 27 City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 28 Zip Country 8. This corporation owes the current year Intangible Yes □ No Personal Property Tax. IF ANY 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CALMES, RICHARD A JR 82 Street Address (P.O. Box Number is Not Acceptable) 1087 PARNELL COURT **DELTONA FL 32738** 83 Zip Code 84 85 City

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: Re	gistered Agent signature req	DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ø C Ø □ □ DELETE	1.1 TITLE	Change Addition
NAME	Richard A. Calmes, Ir	1.2 NAME	
STREET ADDRESS	Richard A. Calmes, Ir 1087 Parnell Ct.	1.3 STREET ADDRESS	
CITY-ST-ZIP	Deltona, FL 32738 President Connie J. Bennett 1087 Parnell Ct. Deltona, FL 32738	1.4 CITY-ST-ZIP	
TITLE	President DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Connie J. Bennett	22 NAME	•
STREET ADDRESS	1087 Parnell Ct.	2.3 STREET ADDRESS	
CITY-ST-ZIP	Deltour FL 32738	2. 4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	Change Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADORESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
O(T) / OT TIO		6.4 CITY-ST-ZIP	

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.