## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State 🕝 DIVISION OF CORPORATIONS

Apr 05, 1999 8:00 am Secretary of State 04-05-1999 90023 020 \*\*\*150.00

**FILED** 

## 1999 DOCUMENT # P98000065515

RIMA, INC.

Sulte, Apt. #, etc.	Thing of the co			
ORLANDO FL 32819  ORLANDO FL 32819  ORLANDO FL 32819  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/27/1998  4. FEI Number  System of Status Desired  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip  Country  Zip  Country  System of Current Registered Agent  PABICH, YAHIA  7450 SUGAR BEN DRIVE  ORLANDO FL 32819  ORLANDO FL 32819  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/27/1998  4. FEI Number  System of Status Desired  System of System of Status Desired  System of Syste	Principal Place of Business	Mailing Address	T INDITIONS IN COURT IN THE COURT AND THE COURT AND COUR	
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2. Principal Place of Business 22. Mailing Address 25. Certificate of Status Desired 27. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 28. Suite, Apt. #, etc. 29. City & State 20. City & State 21. City & State 22. Country 23. Country 24. Country 25. Country 26. Suite, Apt. #, etc. 27. Country 28. This corporation owes the current year Intangible Personal Property.  9. Name and Address of Current Registered Agent  RABICH, YAHIA 7450 SUGAR BEN DRIVE ORLANDO FL 32819  28. Mailing Address 4. FEI Number 5. Certificate of Status Desired 5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 7. Added to Fees 8. This corporation owes the current year Intangible Personal Property. 7. Yes No 10. Name and Address of New Registered Agent  81. Name  RABICH, YAHIA 7450 SUGAR BEN DRIVE ORLANDO FL 32819			<b>1</b>	
Sulte, Apt. #, etc.				
Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  City & State  Zip  Country  25  Name and Address of Current Registered Agent  RABICH, YAHIA  7450 SUGAR BEN DRIVE ORLANDO FL 32819  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Added to Fees  No  No  No  No  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Intangible Personal Property.  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Intangible Personal Property.  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Intangible Personal Property.  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Added to Fees  No  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Added to Fees  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Added to Fees  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Added to Fees  No  No  Suite, Apt. #, etc.  Suite Additional Fee Required  Trust Fund Contribution  Name Additional Fees  No  No  No  Suite, Apt. #, etc.  Suite Additional Fees  Suite Additional	<del></del>	¬	4. FEI Number Applied For Not Applied For Not Applied For	_
City & State  City & State  28  City & State  29  Country  21  22  Country  25  29  29  30  Country  30  Country  48. This corporation owes the current year Intangible Personal Property.  9. Name and Address of Current Registered Agent  RABICH, YAHIA  7450 SUGAR BEN DRIVE  ORLANDO FL 32819  City & State  6. Election Campaign Financing Trust Fund Contribution  8. This corporation owes the current year Intangible Personal Property.  10. Name and Address of New Registered Agent  81  Name  RABICH, YAHIA  82  Street Address (P.O. Box Number is Not Acceptable)  83  84  City  85  City  85  City  85  City  85  City  86  City  87  City  87  Country  87  RABICH  R	Suite, Apt. #, etc.	- <del>-</del> -	5. Certificate of Status Desired \$8.75 Additional Fee Required	
Zip Country Zip Country 30 8. This corporation owes the current year Intangible Personal Property. Yes No  9. Name and Address of Current Registered Agent  RABICH, YAHIA 7450 SUGAR BEN DRIVE ORLANDO FL 32819  8. This corporation owes the current year Intangible Personal Property. Yes No  10. Name and Address of New Registered Agent  81 Name RABICH YAHIA  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City 85 Zip Code	City & State	City & State		
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  81 Name RABICH, YAHIA  7450 SUGAR BEN DRIVE  ORLANDO FL 32819  10. Name and Address of New Registered Agent  82 Street Address (P.O. Box Number is Not Acceptable)  7 T SUGARBONE  83 Ref. City	Zip Country	Zip	I   I   I   I   I   I   I   I   I   I	
RABICH, YAHIA 7450 SUGAR BEN DRIVE ORLANDO FL 32819  82 Street Address (P.O. Box Number is Not Acceptable)  83 B4 City 85 Zip Code			10. Name and Address of New Registered Agent	
7450 SUGAR BEN DRIVE ORLANDO FL 32819  82 Street Address (P.O. Box Namber is Not Acceptable)  R84 City 85 Zip Code	DARICH VAHIA		81 Name RABIEH YAHIA	
84 City 85 Zip Code	7450 SUGAR BEN DRIVE	•	Street Address (P.O. Box Number is Not Acceptable) 7+50 SUGARBERD DR	
84 City 85 Zip Code	ORLANDO FL 32819		83	
OR LANDO FL 32819			84 City ORLANDO FL 85 ZIP Code 32819	

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.

agent. 1	ani ianimai witii, and accept the conganone or, sec-	1011 007 .0000, 1 101	ing Oldinico.	
SIGNATURE		-ti- (NOT	E: Registered Agent signature regi	uired when reinstating) DATE
	Signature, typed or printed name of registered agent and title if applic	· · ·		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	OFFICERS AND DIRECTOR		13.	
TITLE	D	DELETE	1.1 TITLE	Change Addition
NAME	RABIEH, YAHIA		1.2 NAME	
STREET ADDRESS	7450 SUGAR BEN DRIVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32819		1.4 CITY-ST-ZIP	
TITLE	D	DELETE	2.1 TITLE	Change Addition
NAME	RABIEH, MAY		2.2 NAME	
STREET ADDRESS			2.3 STREET ADDRESS	
CITY-ST-ZiP	ORLANDO FL 32819		2.4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME		- <del></del>	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 ADDRESS	
CITY-ST-ZIP			4,4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 C!TY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
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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.

SIGNATURE: \_

2000-9E8 (LOS)

CR2E034 (5/99)