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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 28 1997 8:00am

Secretary of State

561-461-1330

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S69096

(3)

RONRIC, INC.

Principal Place 2814 SOUTH U. 2818 SO US 1 FT PIERCE FL S US	.S. 1	Mailing Address 2814 SOUTH U.S. 1 2818 SO US 1 FT PIERCE FL 34982-6331 US								
US						3. Date Incorporated or Qualified 07/24/1991	3a. Date of Last Report 03/26/1996			
2. Principal Pi	lace of Business	2a. Mailing Address				4. FEI Number	00/2	7 100	.,,	ied For
21		26				65-0276902			Not /	Applicable
Suite, Apt. :		Suite, Apt #, etc.			,	5. Certificate of Status Desired			75 Add e Requ	ditional uired
City & Stati 23		City & State				Election Campaign Financing Trust Fund Contribution			M 00.	
Z _i p	Country	Zip	├ ─┐	ıntry	,	8. This corporation has liability for i			er s. 1	99.032,
24	25	29	30					No		
DF C	9. Name and Address of Curren	t Hegisterea Agent		81	Name	10. Name and Address of New Re	gistered A	gent		
	CASTRO, RICHARD A			61	Name					
2818 SO US 1 FT. PIERCE FL 34962				82 Street Address (P.O. Box Number is Not Acceptable)						
11. 1	ILNOL I L OTODE			83						····
				84	City			85	Zip Co	de
44.0		- 1005 IV00 E I 00			L	rporation submits this statement for the p	FL	ĻĻ		
SIGNATURE	m familiar with, and accept the obligation of regulator against a profession of regulator against the OFFICERS AN	nt and title 4 applicable. (NC				ulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE COS AND	DIREC.	TORE	IN: 13
TITLE	PST OF TOERS AN	DELETE	1.1 7		·····	ADDITIONS/CHANGES TO OFFIC		Cha		Addition
NAME	DECASTRO, RICHARD A.		1.1 II				,		iye i	Addition
STREET ADDRESS	1539-C PHEASANT WALK				ADDRESS					
CITY-S1-ZIP	FT PIERCE FL				ST-ZIP					
TITLE		DELETE	2.1 7)1-ZIF			Cha	nae	Addition
NAME		_	2.2 N				•			
STREET ADDRESS					ADDRESS					
CITY+ST-ZIP					ST-ZIP					
TITLE		DELETE	3.1 T		7111			Cha	nge	Addition
NAME			3.2 N	IAME		•	45			
STREET ADDRESS			3.3 S	TREET	ADDRESS					
CITY-ST-ZIP			3.4 (CITY-	ST-ZIP					
TITLE		DELETE	4.1 T	ITLE				Cha	nge	Addition
NAME			4.21	NAME						
STREET ADDRESS			4.3 \$	TREET	ADDRESS					
CITY - ST - ZIP		F1 55.5			ST - 21P	<u> </u>				Total Control
TITLE		☐ ĐELETE	5.1 T				l	Cha	nge	Addition
NAME			5.2 N							-
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE	***************************************	☐ DELETE	5.4 C 6.1 T		ST - ZIP			Cha	nne	Addition
							i	,,, ÇIIA	ilge (AUGISTOST
NAME STREET ADDRESS			6.2 N		AUDDECC					
CITY-ST-ZIP					ADDRESS ST-ZIP					
14. Ldo here:	t by certify that the information supplie	d with this filing does not aus	alify for the	exe	emplion state	ed in Section 119.07(3)(i), Florida Statute	s. I further	certify	that th	e
informatio	on indicated on this annual report or s	supplemental annual report is the receiver or trustee empo	s true and owered to	acci	urate and the	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as	if mad	e unde	er oath; tha