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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Feb 25 1998 8:00am Secretary of State

•	1998	DIVISION OF	CORPORA	TIONS	Societary	of State
	MENT # S8097 RIS RHYNE, P.A.	79 (5)			1 (88)(818 18) (80)(88)(8)(8)(8)(8)(8)	IIII 81811 81611 81611 81811 1181
Principal Place	e of Rueinace	Mailing Address				1811 BIBIL BIBIL BIBIL BIBIL BIBIL
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701 8TH AVE WEST PO BOX 67 PALMETTO FL 34221-4707 PALMETTO FL 34220-4707 US US			07		DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	
2. Principal Place of Business 2a. Mailing Address					09/17/1991 4. FEI Number	Applied For
21	ace of Dusinoss	26	¬ -		65-0284821	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>			\$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
City & State		City & State		Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28] Zip	Cour	ntru	Trust Fund Contribution	Added to Fees
24	25	29	30	,	This corporation owes or has paid the corporation Property Tax due June 30.	Yes No
	9. Name and Address of Curr		1001		10. Name and Address of New Registers	
RHYNE, J. HARRIS 701 8TH AVE. WEST PALMETTO FL 34221			<u> </u>	 81 Name 82 Street A 83 84 City 	Address (P.O. Box Number is Not Acceptable)	85 Zip Code
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	DPST DELETÉ		1.1 TITU			☐ Change ☐ Addition
NAME	14111101 0 11		1.2 NAJ	i		
STREET ADDRESS	701 8TH AVE. WEST PALMETTO FL			EET ADORESS	·	
CITY-ST-ZIP TITLE	<u> </u>		2.1 7171	Y-ST-ZIP F		Change Addition
NAME			2.2 NAM			_ , _
STREET ADDRESS				EET ADDRESS		
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP		
TITLE	DELETE		3.1 TITL	.E		Change Addition
NAME			3.2 NAM	AE .		
STREET ADDRESS			3.3 STR	EET ADDRESS		
CITY-ST-ZIP		T priese		Y-ST-ZIP		The state of the s
TITLE		DELETE	4.1 TITL			L Change L Addition
NAME			4. 2 NA			1
STREET ADDRESS				EET ADDRESS		1
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITL	/-ST-ZIP		Change Addition
NAME		<u></u>	5.2 NAN			
STREET ADDRESS			1	EET ADDRESS		
CITY-ST-ZIP				-ST-ZIP		
TITLE		☐ DELETE	6.1 TrTL			☐ Change ☐ Addition
NAME			6.2 NAN	1E		
STREET ADDRESS			6.3 STR	EET ADDRESS		
CITY-ST-ZIP				r-ST-ZIP		
14. I hereby c	ertify that the information supplied	with this filing does not qualify	or the exer	nption state	d 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 it made under oath; that I am officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 407, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or organ atlactment with an address.