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 # **\$86468**

1. Corporation Name

R N S INVESTMENTS, INC.

HNSI	WESTMENTS, INC.								
Principal Place	e of Business	Mailing Address	-		- I (MAILEIN imt satia astit asasa artes carra)	#11 0101		1811 61811 1991	
600 LOOP RD		2600 LOOP RD							
AUBERDALE FL 33823 AUBURNDALE FL 33823					DO NOT WRITE IN THIS SPACE				
U\$ U\$					3. Date Incorporated or Qualifed				ı
		•			10/10/1991				ı
2 5	dans of Divisions	2a. Mailing Address			4. FEI Number		An	olied For	
- ¬ '	— ·				59-3082528		_ 	Applicable	1
26 Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75		
	7				5. Certifcate of Status Desired		Fee Re		1
22 27 City & State City & State				7	6. Election Campaign Financing		₹\$5:00°	May Be	
23	28			Trust Fund Contribution		Added t	•		
Zip	Country	1	untry	,	8. This corporation owes the current year	r Intar	ngible		l
24	25	29 30			Personal Property Tax.		Yes	□No	
	9. Name and Address of Curren	t Registered Agent	· ,		10. Name and Address of New Registe	red A	gent		l
			81 Na	me	• 1				ľ
PATEL, PRAKASH 2600 LOOP RD			82 St	eet Addre	ss (P.O. Box Number is Not Acceptable)				l
								l	
AUB	ERNDALE FL 33823		83						l
			84 Cit	v			85 Zip 0	Code	l
						FL_			l
office or r agent. I a	registered agent, or both, in the State.	2 and 607.1508, Florida Statutes, the a of Florida. Such change was authorize tions of, Section 607.0505, Florida Sta	a ov tne o	orporation	ration submits this statement for the purpos n's board of directors. I hereby accept the a	ppoint	ment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: Registere	d Agent sign:	ture required					6
12.	OFFICERS AN	ID DIRECTORS 13	·		ADDITIONS/CHANGES TO OFFICER	SANL			6
TITLE	VP	☐ DELETE 1.11	ITLE	1			☐ Change	☐ Addition	3
NAME	PATEL, PRAKASH H	1.21	NAME						3
STREET ADDRESS		1.33	STREET ADD	ESS					Ü
CITY-ST-ZIP	AUBERNDALE FL 33823		1.4 CITY-ST-ZIP				Change	Addition	٥
TITLE	P	_	2.1 TITLE				☐ Change	Addition	
NAME	PATEL, RAJESH		NAME						ĺ
STREET ADDRESS	77 ORTLEY CT		STREET ADDI	ESS					
CITY-ST-ZIP	-MATAWAN NJ:07747		CITY-ST-ZIP			·	Change	Addition	1
TITLE	S DATE: MARKING	<u> </u>	3.1 TITLE						
NAME	PATEL, MANJU								
STREET ADDRESS			STREET ADDI	ESS					
CITY-ST-ZIP	LAKELAND FL 33813		CITY-ST-ZIP NTLE				Change	Addition	1
TITLE		-							1
NAME	1		NAME	, l	•				
STREET ADDRESS			STREET ADD	E33					
CITY-ST-ZIP			CITY-ST-ZIP				Change	☐ Addition	
TITLE			NAME		, ,			_	
NAME			STREET ADD	RESS				•	1
STREET ADDRESS	·[CITY-ST-ZIP						
CITY-ST-ZIP		3,4 (1
IDLE		DELETE 6.1	rml E				Change	Addition	
NAME		CT OCCUTO	TITLE NAME:				☐ Change	Addition	
NAME STREET ADDRESS		6.21		RESS			☐ Change	Addition	

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.

6.4 CITY-ST-ZIP

SIGNATURE: PLANCES AS POLLS PRAKASH IN PATE

3 / 19 79

941-667-0875 Daytime Phone #

Mar 24, 1999 8:00 am

Secretary of State

03-24-1999 90025 032 ***150.00