COF	E NOW: FI PROFIT RPORATION UAL REPORT 1996	ORATION L REPORT Sandra B. Mortham Secretary of State		F STATE					
	MENT #	S95975	(6)			\dashv			
1. Corporation	n Name RT INDUSTRIE	C INC	` '						
HEOOI	חווקטטאוו וח	o, inc.					E PODSIDIO DIO DEIDI ONIO AGRICADE	e Bohi Bildili Bibli Bebli B	INI DIDI CINI CAN
DI LAB									
Principal Place of Business Mailing Address									iate Biffit fiffit iffi
5600 GULF BOULEVARD ST. PETERSBURG FL 33706 ST. PETERSBURG FL 33706 ST. PETERSBURG FL 33706									
							3. Date Incorporated or Qualified	3a. Date of Las	t Report
• District D							11/20/1991	04/11/	
2. Principal Place of Business 21 5600 Gulf Boulevard 26 5600 Gu				F D 1. 1			4, FEI Number 59-3106536		Applied For
Suite, Apt.	#, etc.	1	Suite, , .#, etc.	Boul	evard		Certificate of Status Desired	<u></u>	Not Applicable 75 Additional
City & Stat	e		City & State						e Required
		Beach,FL	28 St. Petersb	urg E	each.	FL	6. Election Campaign Financing Trust Fund Contribution		.00 May Be
Zip 24 3370 ι		ountry	Zip	Count			8. This corporation has liability for i	ntangibie tax unde	
24 3370		ddress of Current Re		30	· · · · · · · · · · · · · · · · · · ·		Florida Statutes Yes Name and Address of New R	No Registered Ament	
CODTUR	(F. IPPPBPU)			8				-	
	ie, jeffrey L. Jlf boulevard	l		8	2 Street Ac	ddress	H. Andrews (P.O. Box Number is Not Acceptab	le)	
	ERSBURG FL 33			8	56 <u>01</u>	0 G	ulf_Boulevard		
3				В	4 City			Total	7in Carla
11 Pursuant	to the provisions of	Sections 607 0602 por	1 607 1500 Florido Statutos	450 550	St.Pe	ete	rsburg Beach, submits this statement for the pur	FL 85	Zip Code 33706
or register	red agent, or both, in	the State of Florida. Sobligations of Section 6	Such change was authorized 807.0505, Florida Statutes.	by the cor	poration's bo	oard of	directors. I hereby accept the appo	pose of changing it pintment as register	ts registered office red agent. I am
SIGNATURE .	Allas	ff Wall		vl.H.	Andre	- w €	ر Vice President،	2/14/9	76
1 12.	Signature, typed or printed	name of registered agent and to OFFICERS AND DI	itle if applicable. NOTE RECTORS	Registered Ag	cnt signature reck	C C Shield	ADDITIONS/CHANGES TO OFFI	DATI DIDEO	TODO III 40
TITLE	DVS		₹ }¢DELETE	1. 1 TITLE			ADDITIONS/OFFINGES TO OFFI	Chang	
NAME OTRECT LODGES	FORTUNE, JE 5600 GULF BI			1.2 NAME					ī
STREET ADDRESS CITY-ST-ZIP	ST. PETERSBI				ET ADDRESS				e [] Addition
TITLE	CBTD		DELETE	14 DITY - 2 1 TITLE				Chang	e [] Addition
NAME	FORTUNE, JO		nn.	2 2 NAME				_	
STREET ADDRESS	5600 GULF BI ST PETERSBU				et address				
CITY-ST-ZIP TITLE	P		DELETE	2.4 CITY- 3 1 TITLE		1 /D	'AS/D	Chang	e 🗍 Addition
NAME	SHERMAN, RI		_	3.2 NAME	-		nard E. Sherman	XX	is Divoquion
STREET ADDRESS	5600 GULF BO			33. STRE	ET ADDRESS 5	600	Gulf Boulevard	1	
CITY-ST-ZIP TITLE	VAS	JRG BEACH FL	☐ DELETE	3.4 CITY-	ST-ZIP S	St.F	etersburg Beach	. FL <u>3</u> 3	706
NAME	ANDREWS, SH	IERYL H.		4. 1 TITLE 4.2 NAME				xx Chang	e
STREET ADDRESS	5600 GULF BO				i S	sner Kann	ryl H. Andrews Gulf Boulevard	3	
CITY-S1-ZIP	ST. PETERSBU	JRG BEACH FL		4.4 CITY -	ST-ZIP S	t.P	etersburg Beach	, FJ33'	706
TITLE NAME			☐ DELETE	5. 1 TITLE				Thăng	e 🔲 Addition
STREET ADDRESS				5.2 NAME 5.3 STREE	T ADDRESS				Ì
CITY-ST-ZIP				5.4 CITY-					
TITLE			☐ DELETE	6 1 TITLE			-60000175 -03/21/96010	,20 6 ,5,	e Addition
NAME STREET ADDRESS				6.2 NAME			-03/21/36010 ***200.00	ددUUb	
STREET ADDRESS CITY-ST-ZIP					I ADDRESS		տատ Ընն 100		W. L.
	v certify that the info	rmation supplied with t	this filing is valuatorily furnish	6.4 CiTY-		for the	exemption stated in Section 119 0	7(0)44 Florido Des	ZVK

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), Florida Statuties wither 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 high undoes 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.

GNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE:X

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×2/14/96(813)562-1202-