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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 12 1997 8:00am

Secretary of State

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V61872

(0)

R.H.L. ENTERPRISES, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address		1 10011 0[18]	BIBUS DIDII DIDII BIBU BIBUT DIDII IBDI	
5270 44TH AVE N ST PETERSBURG FL 39709 US		20 164TH AVE E REDDINGTON EBACH FL 33708-1518 US					
					3. Date Incorporated or Qualified 09/03/1992	3a. Date of Last Report 05/01/1996	
2. Principal Place of Business		2a. Mailing Address			4. FEI Number	Applied For	
21		26	· · · · · · · · · · · · · · · · · · ·		59-3141885	Not Applicable	е
Suite, Apt. #, etc.		Suite, Apt. #, etc.	- 1		5. Certificate of Status Desired	S8.75 Additional	
City & State		City & State	City & Stato		6 Floring Committee Figure 199	Fee Required	႕
23		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be		
Zip Country		7 _(p)			This corporation has liability for		-
24 25		29	30		Florida Statutes Yes No		1
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	gistered Agent	J
STEAGALL, BARRY M.				Name			Ì
6500 CENTRAL AVENUE			82	Street Add	ress (P.O. Box Number is Not Acceptate	ilo)	
ST. I	PETERSBURG FL 33707		-29				
			83	1			- (
			84	City		85 Zip Code	
₫₫ Duraunnt	to the provisions of Contions 607.05.00	and 607 1500 Florida Clai	the she	in manual acre	the state of the s	FL 65 Zip Cook	
office or r	egistered agent, or both, in the State of	of Florida. Such change was	s authorized b	y the corpora	poration submits this statement for the partion is board of directors. Thereby acceptions	ourpose of changing its registered of the appointment as registered	1
agent. I a	m familiar with, and accept the obligation	lions of, Section 607.0505, I	Florida Statute	! \$.			- {
SIGNATURE	Signature, typed or printed name of registered agen	Land title if anyl cable (N	OTE: Registered As	vool eignature requi	rod when reinstating)	DATE	
12.	OFFICERS AND		13.	ichi algusistic toda	ADDITIONS/CHANGES TO OFFIC		
TITLE	D	☐ DELFTÉ	1.1 TOLE			Change Addition	ī]
NAME	LLOYD, HEATHER	1.21		Ì			Ì
STREET ADDRESS	5270 44TH AVENUE NORTH		1.3 STREET ADORESS				ļ
CITY-ST-ZIP	ST. PETERSBURG FL		1.4 CITY -	ST-ZIF			
TITLE	D	DELETE	2.1 TO LE	Ţ		Change Addition	a
NAME	LLOYD, RANDOLPH M.		2.2 NAME				
STREET ADDRESS	5270 44TH AVENUE NORTH		23 STREE	1 ADDRESS			
CITY-ST-ZIP	ST. PETERSBURG FL	T BUILTE	2 4 CITY	S1-7/P		0	{
TITLE		DELETE	3.1 7 ITLF			☐ Change ☐ Addition	۱'
NAME CYDECT ADDRESS			3.2 NAME	1 10000000			- }
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CITY-ST-ZIP TITLE			3.4 CITY-	S1-2IP		Change Addition	\dashv
NAME		2	4. 2 NAMI				
STREET ADDRESS	RESS		1	1 ADDRESS			1
CITY-ST-ZIP			4.4 Dily-	ĺ			
TITLE		☐ DFLETE	51 TITLE			Change Addition	~
NAME			5.2 NAME				
STREET ADDRESS			5.3 \$TREE	1 ADDRESS			-
CITY-ST-ZIP			5.4 CHY-				
TITLE		DELETE	6.1 TITLE			Change Addition	n (
NAME			6.2 NAME				
STREET ADDRESS			63\$1REE	1 ADDRESS			1
	i e e e e e e e e e e e e e e e e e e e		T				- 1

14. I do 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 offect as if made under oath, that I am an officer or director of the comporation or the receiver or trustee empowered to except this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 4 changed, or organ attachment with an appress.

1 15-07