

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

FILED
Jun 04 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morjhany
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # K65243
 1. Corporation Name

TRU-RAY, INC.

Principal Place of Business
CYPRESS LOCKSMITH
1650 CYPRESS DRIVE
JUPITER, FL. 33469

Main Address
Ray Press
3837 BUTTERCUP CIR. N.
PALM BEACH GARDENS,
FL. 33410

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		4. FEI Number		Applied For	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	02/06/1989		591864020		Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired		8.75		Additional Fee Required	
23	Zip	28	Country	<input type="checkbox"/>		5.00		May Be Added to Fees	
24	Country	29	Country	6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30	
		30		<input type="checkbox"/>		<input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PRESS, RAY
3837 BUTTERCUP CIRCLE NORTH
PALM BEACH GARDENS, FL 33410

10. Name and Address of New Registered Agent

81	Name	
82	Street Address (P.O. Box Number is Not Acceptable)	
83		
84	City	FL
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 of Registered Agent or person authorized to change agent) _____ (Signature of Registered Agent or person authorized to change agent)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> DELETE	P/D Ray Press	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	3837 Buttercup Cir. North	12 NAME	
	Palm Beach Gardens, Fl. 33410	13 STREET ADDRESS	
		14 CITY, ST, ZIP	
<input type="checkbox"/> DELETE	S/T/D Trudie Press	21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	3837 Buttercup Cir. North	22 NAME	
	Palm Beach Gardens, Fl. 33410	23 STREET ADDRESS	
		24 CITY, ST, ZIP	
<input type="checkbox"/> DELETE		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY, ST, ZIP	
<input type="checkbox"/> DELETE		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	
		43 STREET ADDRESS	
		44 CITY, ST, ZIP	
<input type="checkbox"/> DELETE		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		52 NAME	
		53 STREET ADDRESS	
		54 CITY, ST, ZIP	
<input type="checkbox"/> DELETE		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		62 NAME	
		63 STREET ADDRESS	
		64 CITY, ST, ZIP	

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 06/08/98 01010 028
 ***150.00

14. I hereby certify that the information supplied with this report does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report is supported by reasonable proof, 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 registered 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 not listed, or omitted, in Block 1 with an address.

SIGNATURE: *Trudie Press* TRUDIE PRESS MAY 26, 1998 561)746-7916

CR2E034 (10/97)