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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000073447 (2)

RAHAL MOBIL, INC.

Principal Place of Business

100 SOUTH SMORAN BLVD WINTER PARK FL 32792

3. Date Incorporated or Qualified 3a. Date of Last Report 09/30/1994 04/22/1996 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3270907 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 RAHAL, ALI 100 SOUTH SMORAN BLVD 82 Street Address (P.O. Box Number is Not Acceptable) WINTER PARK FL 32702 83 84 City 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 Sign it are typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition THUE 11 TOLE NAME RAHAL, ALI 1.2 NAME 100 SOUTH SEMORAN BLVD STREET ADORESS 1.3 STREET ADDRESS WINTER PARK FL 32782 1.4 CITY - ST- ZIP CITY - ST - 7:P DELETE Change Addition THE 2.1 TITLE 22 NAME NAME STREET ADDRESS 23 STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIF DELETE 111.6 31 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP DELETE Change Addition THILE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY+ST 20 4.4 CITY - ST- ZIP DELETE Change Addition 5.1 TITLE HILLE HAM 5.2 NAME 5.3 STREET ADDRESS STREET ACCORESS 5.4 DITY-ST-ZIP CITY - ST- ZIP DELETE Change Addition 10:1 61 TITLE

62 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Too 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 arm 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

SIGNATURE:

NAMO

STREEL ADDRESS

appears in Block 12 or Block 13 if changed, or on an attachment with an address

FILED

Apr 15 1997 8:00am

Secretary of State