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

PROFIT CORPORATION ANNUAL REPORT



Secretary of State

DIVISION OF CORPORATIONS

1998

DOCUMENT #

P94000073447 (2)

RAHAL MOBIL, INC.

Apr 28 1998 8:00am Secretary of State

` · ·					
Principal Place of Business Mailing Address			T TOURTHUR THE PARTY DIGIT COUNTRIES DAVIS DE	ULI BOORD ININ DIDIK DUBIK FOEK 1081	
100 BOUTH SMORAN BLVD P.O. BOX 149428 WINTER PARK FL 32792 ORLANDO FL 32814 US				DO NOT WRITE IN T	HIS SPACE
				3. Date Incorporated or Qualified	
2. Principal Place of Business	2a. Mailing Address			09/30/1994 4. FEI Number	Applied For
	26			59-3270907	Not Applicable
Suite, Apt. #, etc Suite, Apt. #, etc.					\$8.75 Additional
	27			5. Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Z _{IP}	Country		Trust Fund Contribution	Added to Fees
 	─ ` }-	30		 This corporation owes or has paid the Personal Property Tax due June 30. 	current year Intangible
g, Name and Address of Current Re		, , , , , , , , , , , , , , , , , , , 		10. Name and Address of New Registe	
, RAHAL, ALI		81	Name		
100 SOUTH SMORAN BLVD WINTER PARK FL 32792		82	82 Street Address (P.O. Box Number is Not Acceptable)		
		83	- Street Floation	33 () TO BOX NUMBER 18 NOT ACCEPTABLE)	
		84	Cia		[a=1 75 0 d
			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, typed or printed name of registered agent an			t signature required	· · · · · · · · · · · · · · · · · · ·	
12. OFFICERS AND DE	RECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS	
TITLE D NAME RAHAL, ALI	T DEFEIG	1.1 TITLE			Change Addition
STREET ADDRESS 100 SOUTH SEMORAN BLVD		1.2 NAME 1.3 STREET A	DDatee		
CITY-ST-ZIP WINTER PARK FL 32792		1.4 City-St			
TITLE	DELETE	21 TITLE	- <u>4</u>		Change Addition
NAME		22 NAME			
STREET ADDRESS		2 3 STREET A	DDRESS		
CITY - ST - ZIP		2. 4 CITY - ST	- ZIP		li di
TITLE	DELETE	3.1 TITLE			Change Addition
NAME		3 2 NAME			
STREET ADDRESS		3.3 STREET A	DDRESS		
CITY-ST-ZIP	T-1	3.4, CITY - ST	- ZIP		
TITLE	L DELETE	4.1 TITLE			Change Addition
NAME		4. 2 NAME	-		
STREET ADDRESS		4.3 STREET A			
CITY-ST-ZIP	DELETE	4.4 CITY - ST-	ZIP		Channa
TITLE NAME	₩ hereie	5.1 TITLE 5.2 NAME			Change Addition
STREET ADDRESS		5.2 NAME 5.3 STREET A	nnpecc		
CITY-ST-ZIP					
TITLE	☐ DELETE	5.4 CITY - ST- 6.1 TITLE	· ĮIF	 	Change Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET A	DORESS		
CITY-SI-ZIP		6.4 CITY-ST-	i		

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 ennual 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 occiproration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE:

407.679-8709