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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

J57383

(8)

RANDA ENTERPRISES, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1998 8:00am Secretary of State



2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2770710 Suite, Apt. #, etc. 5. Certificate of Status Desired City & State City & State 6. Election Campaign Financing	Applied For Not Applicable \$8.75 Additional Fee Regulred \$5.00 May Be
Suite, Apl. #, etc.  59-2770710  Suite, Apl. #, etc.  5. Certificate of Status Desired  City & State  City & State  6. Election Campaign Financing	\$8.75 Additional Fee Required
22 Sate   5. Certificate of Status Desired  City & State   6. Election Campaign Financing	Fee Required
	9 <b>\$5.00</b> May Be
23 32 13 Trust Fund Contribution	Added to Fees
	s paid the current year Intangible
24 25 29 32937 30 USA Personal Properly Tax due J	
9. Name and Address of Current Registered Agent 10. Name and Address of New	Registered Agent
RANDA, KATHLEEN A	
217 MICANOPY COURT 82 Street Address (P.O. Box Number is Not Accept	otable)
INDIAN HARB BEACH FL 32937	
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 office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby ac	ne purpose of changing its registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statules.	
SIGNATURE Signature, typed or printed name of registered agent and title it implicable (NOTE Registered Agent signature required when reinstating)	DATE
	FICERS AND DIRECTORS IN 12
TITLE D LIGHTS 1.1 TITLE	☐ Change ☐ Addition
NAME RANDA, MICHAEL J. 12 NAME	
STREET ADDRESS CITY-ST-ZIP SATELLITE BEACH FL  1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	
CITY-ST-ZIP SATELLITE BEACH FL 1.4 CITY-ST-ZIP  TITLE D DELETE 2.1 TITLE	Change Addition
NAME RANDA, KATHLEEN A. 22 NAME	Change C Audition
STREET ADDRESS 1771 HIGHWAY A1A 23 STREET ADDRESS	
CITY-ST-ZIP SATELLITE BEACH FL 2.4 CITY-ST-ZIP	
TITLE DELETE 3.1 TITLE	Change Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRES	
· CITY-S1-ZIP	
TITLE DELETÉ 4.1 TITLE	Change Addition
NAME 4.2 NAME	
STREET ADDRESS 4.3 STREET ADDRESS	ţ
CITY-ST-ZIP 4.4 CITY-ST-ZIP	Diament I Addition
TITLE L. DELETE 5.1 TITLE	[_] Change [_] Addition
NAME 5.2 NAME	
STREET ADDRESS  CITY-ST-ZIP  5.4 CITY-ST-ZIP	j
### 5.4 CITY - ST - ZIP	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS	i
CITY-ST-ZIP 6.4 CITY-ST-ZIP	j
44 Hosely and the information of the black o	s. I further certify that the information
14. Thereby certify that the information supplied with this filling does not quality for the exemption stated in Section 119.07(a)(f), Florida Statute indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect a officer of director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statute Block 12 or Block 13 if changed or on an attachier in with an address.	es; and that my name appears in