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

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

99 APR 26 PM 4:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 478987

1. Corporation Name

RAEFEL, INC

Principal Place of Business
16701 S.W. 49 ST
FT LAUDERDALE, FL 33331

Mailing Address
SAME

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21 Suite, Apt #, etc
22 City & State
23 Zip
24 Country 25

2a. Mailing Address
26 Suite, Apt #, etc
27 City & State
28 Zip
29 Country 30

3. Date Incorporated or Qualified: 1975

4. FEI Number: 59 164 7500 [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [ ] Yes [X] No

9. Name and Address of Current Registered Agent

J. RAY PERMENTER
16701 S.W. 49 ST
FT LAUDERDALE, FL 33331

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 (type or print name of registered agent, and title if any) (Name of Business Entity if signature is for a business) Date

12. OFFICERS AND DIRECTORS

TITLE: PRES-SECY [ ] DELETE
NAME: J. RAY PERMENTER
STREET ADDRESS: 16701 S.W. 49 ST
CITY-ST-ZIP: FT LAUDERDALE, FL 33331

TITLE: V.P.-TREAS. [ ] DELETE
NAME: VERNON MONTRICHARD
STREET ADDRESS: 16701 S.W. 49 ST
CITY-ST-ZIP: FT LAUDERDALE, FL 33331

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE [ ] DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12

[ ] Change [ ] Add

AMH010285896B--9
-04/30/99--01116--010
****150.00 ****150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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 be in accordance with Section 607.0128, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or is added in Block 13 with an address, with all other like improperly.

SIGNATURE: J. Ray Permenter J. RAY PERMENTER 3 APRIL 99 954 579 4275
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone

CR2E034 (11/98)