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

POCUMENT # 659684

(5)

FILED

Apr 24 1998 8:00am

Secretary of State

RALEIC	GH - PARKER ENTERPRISES	S, INC.				
Principal Plac	e of Business	Mailing Address			T HOMAIN MINDS MEINK INVIO AVINE SUBERI AND AND	tel Miðfi græst arder Arbir blant indi
823 NORTH FEDERAL HIGHWAY 623 NORTH FEDERAL HIC C/O CHARLES 8. DALE. JR. C/O CHARLES S. DALE. FT. LAUDERDALE FL 33304 FT. LAUDERDALE FL 3330			E. JR.		DO NOT WRITE IN	THIS SPACE
					3. Date Incorporated or Qualified 03/19/1980	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		59-1997910	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				CO 7E 1440
22		27		6. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution		
Zip	Country Zip		Country	/	8. This corporation owes or has paid th	e current year Intangible
24	25	29	30		Personal Property Tax due June 30.	🔀 Yes 🔲 No
	9. Name and Address of Curren	t Registered Agent		,	10. Name and Address of New Registe	ered Agent
	ALE, CHARLES S., JR.		81	Name		
62	3 NORTH FEDERAL HIGHWAY		62	Street Add	ress (P.O. Box Number is Not Acceptable)	
FT. LAUDERDALE FL 33301						
			63			
			84	City		les Zin Code
			04	City		FL 85 Zip Code
office or r agent. La SIGNATURE					poration submits this statement for the purportion's board of directors. I hereby accept the	
10	Signature typed or printed harm of registered ager OFFICERS AND	~ <u></u>	13.	ent signature requi		AND DIDEOTODO IN 40
12.	DS OFFICE 15 AINE	DELETE	13. 1.1 TITLE	— т	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	RALEIGH, JOAN S.	breete				T cliaide T Voorton
-	AGO AL PROPERAL LUIGO		1.2 NAME			
STREET ADDRESS	FT LAUDERDALE, FL 00000			ADDRESS		
CITY-ST-ZIP	DP	DELETE	1.4 City-5	ST-ZIP		Change Addition
TITLE	RELEIGH, JACK	[] Office	2.1 TITLE	- 1		Change Addition
NAME	-		2.2 NAME			
STREET ADDRESS	623 N FEDERAL HWY		2.3 STREET		*	
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP		
TITLE		DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET)		
CITY-ST-ZIP			3.4. CITY-	ST-ZIP		
TITLE		DELETE	4.1 TITLE	}		Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZIP		·	4.4 CITY - S	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STAEET	ADDRESS		
CITY-ST-ZIP				ST-ZIP	·	
TITLE			6.1 TITLE			Change Addition
NAME -			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		}
CITY-ST-ZIP			6.4 CITY - 5		·	

14. 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 annual 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 corporation or the receiver or 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 changed, or on an attachment with an address.

SIGNATURE:

1. Kallinh

J RALFIGH

4-14-98 954-764-1430