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 #

678843

(4)

SOUTHERN RAY, INCORPORATED																
Principal Place of Business Mailing Address											-		M Albi WIWIL O	4011 01011		D11 DIDII 1001
100 SE 2ND ST 100 SE 2ND ST STE. 2800 STE. 2800 MIAMI FL 33131 MIAMI FL 33131											DO NOT	WRIT	E IN THIS	SPACE	-	
US			US						3. Date Incorporated or Qualified							
											07/14/1980					
2. Principal P	lace of Busin		2	2a. Mailing Address						 					plied For	
21					26						59-2016650				No	t Applicable
Suite, Apt. #, etc					Suite, Apt #, etc.						5. Certificate of Status Desir	ed			.75 A ee Re	dditional quired
City & State					City & State				_		6. Election Campaign Finance	cing		\$5	5.00	May Be
23					28						Trust Fund Contribution					o Fees
Zip	Country				Zip			Country			8. This corporation owes or has paid the current year Intangible					
24	25			29				<u> </u>			Personal Property Tax due June 30. Yes No					
			Address of Curre	nt Reg	latered Agen	<u>t</u>			Τ.		10. Name and Address of N	ew R	egistered	Agent		
			ebra Weiss					81] '	Name						
	00 SE 2ND					82	Street Addres		ess (P.O. Box Number is Not Acceptable)					•		
STE. 2800 MIAMI FL 33131									┢							
								84	┝-	City				85	Zip C	Code
24 5			10		007.4600.60				L				Fl	- 		
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 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 ragent 1 am familiar with, and accept the obligations of Section 607.0505, Florida Statutes SIGNATURE Signature typed or publish table of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE																
12.	ASAT		OFFICERS AN	D DIRE		DELETE		13.			ADDITIONS/CHANGES TO	OFFI	CERS AN			
TITLE	DPST	NOT O	NE DAY I		Ш	DELETE	ı	1.1 TITLE						☐ Ch	ange	Addition
NAME	GOODSTONE, RAY J.							1.2 NAME								,
STREET ADDRESS 100 SE 2ND ST., STE. 2800 CITY-ST-ZIP MIAMI FL 33131								1.3 STREET ADDRESS								
CITY-ST-ZIP TITLE	MIAMI	FL .	20131			DELETE	-	1.4 City - S 2.1 Title	šī	ZIP				Ch	2000	Addition
NAME					ليبا	Detert	1	22 NAME							iange	Addition
STREET ADDRESS								2.3 STREET		NDDCCC						
CITY-ST-ZIP								2. 4 CITY -								
TITLE	 			·		DELETE		3.1 TITLE	31-	- Alf				☐ Ch	nange	Addition
NAME					_			3.2 NAME							-	
STREET ADDRESS								3.3 STREET	I AL	ODRESS						
CITY-ST-ZIP								3.4. CITY-	S۲-	ZIP						
TITLÉ						DELETE	T	4.1 TITLE						Ch	iange	Addition
NAME							•	4 2 NAME								
STREET ADDRESS							1	4.3 STREET	AD	OORESS						
CITY - ST - ZIP								4.4 CITY-5	31-	ZIP						
TITLE						DELETE		5.1 TITLE						Ch	ian g e	Addition
NAME								5.2 NAME								
STREET ADDRESS								5 3 STREET	AL	DDRESS						
CITY-ST-ZIP								5.4 CITY - 9	si -	ZIP						
TIFLE	}				لـا	DELETE	- 6	6.1 TITLE		1				☐ Ch	iange	Addition
NAME								62 NAME		ļ						
STREET ADDRESS	1						- 1	63 STREET	AD	DDRESS !						

14. Thereby 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 suppliercental 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.

6.4 CITY - ST - ZIP

SIGNATURE:

Pay Goodston

3/20/98

305-53/-0973

FILED

Apr 24 1998 8:00am

Secretary of State

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