

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

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90126 047 ***150.00

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DOCUMENT # F95000002920

1. Corporation Name
NRAI SERVICES, INC.



Principal Place of Business
10 WOLF PACK CT.
HAMILTON NJ 08619

Mailing Address
10 WOLF PACK CT.
HAMILTON NJ 08619

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		06/16/1995	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		13-3837683	
24 Country		30 Country		Applied For	
				Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing --- ☐ \$5.00 May Be Added to Fees	
				8. This corporation owes the current year intangible Personal Property Tax. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

UCC FILING & SEARCH SERVICES, INC.
526 EAST PARK AVE.
STE. 200
TALLAHASSEE FL 32302

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	Director ☐ Change ☒ Addition
NAME	HOWARTH, DENNIS E	1.2 NAME	Stephen W. Craig
STREET ADDRESS	10 WOLF PACK CT.	1.3 STREET ADDRESS	737 Millbrook Rd., River Edge, NJ 07661
CITY-ST-ZIP	HAMILTON NJ 08619	1.4 CITY-ST-ZIP	
TITLE	VTD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	TARZIAN, DENNIS	2.2 NAME	
STREET ADDRESS	576 HIGHLAND AVENUE	2.3 STREET ADDRESS	
CITY-ST-ZIP	RIDGEWOOD NJ 07450	2.4 CITY-ST-ZIP	
TITLE	VSD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	BACLET, CHARLES	3.2 NAME	
STREET ADDRESS	2030 MAIN STREET	3.3 STREET ADDRESS	
CITY-ST-ZIP	IRVINE CA 92714	3.4 CITY-ST-ZIP	
TITLE	AS ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ASH, EILEEN	4.2 NAME	
STREET ADDRESS	644 GREENMAN COURT	4.3 STREET ADDRESS	
CITY-ST-ZIP	SEAFORD NY 11783	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	ROBINSON, JOHN	5.2 NAME	
STREET ADDRESS	1212 GUADALUPE	5.3 STREET ADDRESS	
CITY-ST-ZIP	AUSTIN TX 78701	5.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	HOPTON, JANICE	6.2 NAME	
STREET ADDRESS	101 CAPITOL WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	OLYMPIA WA 98501-1077	6.4 CITY-ST-ZIP	

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 with all other like empowered.

SIGNATURE:

Dennis E. Howarth 1/15/99 (609) 716-0300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
President

CR2E034 (11/98)