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

PROFIT CORPORATION **ÄNNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # F97000006793

RAY A. WILSON ENTERPRISES INC.

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90035 005 ***150.00



Principal Place	of Business	Mailing Address						
7172 ESTRELLA DE MAR RD CARLSBAD CA 92009		1330 BLUE HERON AVE.	1330 BLUE HERON AVE.			•		
		ENCINITAS CA 92024		DO NOT WRITE IN THIS SPACE				
US					3. Date Incorporated or Qualifer	d		
	•				12/22/1997			
	(2)	2a. Mailing Address			4. FEI Number		Appl	ied For
T. Philippi i lace of Susmood					33-0633460		Not a	Applicable
ZI		Suite, Apt. #, etc.					\$8.75 Ad	lditional
Suite, Apr. #, etc.				5. Certifcate of Status Desired Fee R		Fee Req	uired	
22		City & State	City & State		6. Election Campaign Financing		\$5.00 N	lay Be
City & State			7		Trust Fund Contribution	" . 🗆	Added to	•
Zip Country		28 Zip	Zip Country		8. This comparation owes the current year Intangible			
Zip		<u>├</u> ¬ '	30	•	Personal Property Tax.	•	☐Yes	≰ No
24	9. Name and Address of Currer	29 Agent	130]		10. Name and Address of New	Registered	Agent	
	9. Name and Address or Currer	A A A CONTRACTOR	8	1 Name			• •	
Wit	CON DEDDY		L.	<u> </u>	(D.O. Day Mirrob as in Alas Annua	ntable)		
RAY 11252 W. HILLSBOROUGH AVE.				82 Street Address (P.O. Box Number is Not Acceptable)				
TAMPA FL 33635			8:	3	1,900,74,61,61,61,61	Marin Da	(4) (5 a) (1) (5 a) (5 b)	120 111 120
IMMEN EL 33033			"	<u> </u>		966 (C + 37)	1992年開発	9188 (14 17 4)
			8-	4 City	Consider to the event with	FI	85 Zip C	òde '''''
er an ertaleti.	to the provisions of Sections 607.050 registered agent, or both, in the State			1	maration submits this statement for the	ne purpose o	changing its r	egistered
SIGNATURE	Signature, typed or printed name of registered age	711 C170 C444 11		gent signature requ	ADDITIONS/CHANGES TO	DATE	ND DIRECTOR	
12.	OFFICERS AI	ND DIRECTORS	13.			JI FICERS A	Change	Addition
TITLE	PSDC	☐ DELETE	1.1 TITLE					
NAME	WILSON, RAY A	1	1.2 NAM		•			
STREET ADDRESS			1.3 STRE	EET ADDRESS				
CITY+ST-ZIP	CARLSBAD CA 92009		1.4 CRY				☐ Change	Addition
TITLE		☐ DELETE	2.1 TITLE					
NAME			2.2 NAMI	E		•	•	
STREET ADORESS	5		2.3 STRE	EET ADDRESS			•	
CITY-ST-ZIP		yers to the first of the first	2. 4 CITY	/-ST-ZIP			[] Change	Additio
TITLE	and the second of the second o	DELETE	3.1 TITLE	E		•	□ cusude	
NAME SY 410			3.2 NAM	E				
STREET ADDRESS		•						17-4-39 (68)
CITY-ST-ZIP			3.3 STR	EET ADDRESS	1 187 J. F. 1250	1000	经票据 翻	
TITLE	7. St. 3085	: , <u>,</u>		EET ADDRESS Y-ST-ZIP			問題機構	超数据 鐵
·····	H VA. FIL. 30505	DELETE		Y-ST-ZIP			Change	☑ Additio
NAME	# (A. 19)" (3) (2) (2)	☐ DELETE	3.4. CIT	Y-ST-ZIP		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change	Addition
NAME	Mark to the season		3.4. CITY 4.1 TITL 4.2 NAM	Y-ST-ZIP		1 2 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	Change	Addition
STREET ADDRES	Mark to the season	☐ DELETE	3.4. CITY 4.1 TITU 4.2 NAM 4.3 STR	Y-ST-ZIP E ME				
STREET ADDRES	Mark to the season	☐ DELETE	3.4. CITY 4.1 TITU 4.2 NAM 4.3 STR	Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP			☐ Change	
STREET ADDRESS CITY-ST-ZIP TITLE	Mark to the season	DELETE	3.4. CITY 4.1 TITLL 4.2 NAA 4.3 STRI 4.4 CITY	Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E		1 1 1 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2 2 2 1 2		
STREET ADDRES CITY-ST-ZIP TITLE NAME	(A. P. 1930) (S.	DELETE	3.4. CITY 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM	Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E		Tall the		
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	(A. P. 1930) (S.	DELETE	3.4. CITM 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITM 5.1 TITL 5.2 NAM 5.3 STR	Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME ME				
STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP.	S 2000	DELETE	3.4. CITM 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITM 5.1 TITL 5.2 NAM 5.3 STR	Y-ST-ZIP E EET ADDRESS (-ST-ZIP E HE HEET ADDRESS (-ST-ZIP	ाक विश्वति			☐ Additio
STREET ADDRES CITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP. TITLE	S 2000	DELETE	3.4. CITM 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL	Y-ST-ZIP E EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP E	ाक विश्वति		☐ Change	☐ Additio
STREET ADDRES GITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP TITLE NAME	S TO THE STATE OF	DELETE	3.4. CITM 4.1 TITLL 4.2 NAM 4.3 STR 4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM	Y-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP EET ADDRESS (-ST-ZIP E AE	ाक विश्वति		☐ Change	☐ Additio
STREET ADDRES GITY-ST-ZIP TITLE NAME STREET ADDRES CITY-ST-ZIP. TITLE	S TO THE STATE OF	DELETE	3.4. CITM 4.1 TITLI 4.2 NAM 4.3 STR 4.4 CITM 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITM 6.1 TITL 6.2 NAM 6.3 STR	Y-ST-ZIP E EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP E ME EET ADDRESS (-ST-ZIP E	ाक विश्वति		☐ Change	Addition Addition

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: