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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Country

9. Name and Address of Current Registered Agent

25

RAUCH, NORMAN

3450 S. OCEAN BLVD.

PALM BEACH FL 33480

(8)

RAUCH CORP., II

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28 Zφ

Principal Place of Business

2. Principal Place of Business

Sulte, Apt. #, etc.

#522

City & State

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Zip

5804 TIMBER VALLEY DR LAKE WORTH, FL 33463

Mailing Address

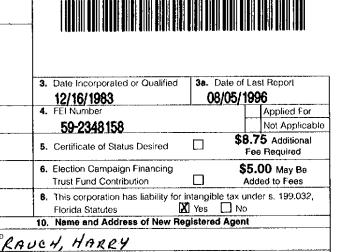
2a. Mailing Address

City & State

Suite, Apt. #, etc.

PO BOX 6199 LAKE WORTH FL 33466-6199

FILED May 01 1997 8:00am Secretary of State



Street Address (P.O. Box Number is Not Acceptable)

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, and accept the obligations of, Section 607.0505, Florida Statutes.

Country

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OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
PSTD	⊠ DELETE	1.1 TOLE	PSTD	Change	Addition
		1.2 NAME	RAVEH HARRY		
3450 S. OCEAN BLVD. #522		1.3 STREET ADDRESS	5904 TIMBER VALLEY	DC	
PALM BEACH FL 33480		1.4 CITY - ST - ZiP	LAKE WURTH, FL 3346.	3	
	DELETE	2 1 1ITLF		Change	Addition
		2 2 NAME			
		23 STREET ADDRESS			
		2 4 CITY-ST-7IP			
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		3.2 NAME			
		3.3 STREET ADDRESS			
		3.4. CITY - ST - ZIP			C 1 4 1 112
	L DELETE	. 4.1 TITLE		L Change	Addition
		4. 2 NAME	•		
		4.3 STREET ADORESS			
		4.4 CITY - S1 - ZIP			
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		5.2 NAME			
		5.3 STREET ADDRESS			
		5.4 CiTY - ST - ZIP			
	☐ DEFELE	61 TITLE		L_ Uhange	Addition
		6.2 NAME	· ·		
		6.3 STREET ADDRESS			
	OFFICERS AND DIRECTORS PSTD RAUCH, NORMAN	Signature, typed or printed name of registered agent and title if applicable (NOV) OFFICERS AND DIRECTORS PSTD RAUCH, NORMAN 3450 S. OCEAN BLVD. #522 PALM BEACH FL 33480	Signature, typed or pented name of registered agent and file: it applicable OFFICERS AND DIRECTORS PSTD RAUCH, NORMAN 3450 S. OCEAN BLVD. #522 PALM BEACH FL 33480 DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP DELETE 6.1 TITLE 6.2 NAME	Signature, typed or period name of registered agent and tic. if applicable OFFICERS AND DIRECTORS PSTD RAUCH, NORMAN 3450 S. OCEAN BLVD. \$522 PALM BEACH FL 33480 DELETE DELETE	Signature bysed or period name of registered able appetiable Change

14. I do 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.

6.4 CHTY-ST-7IP