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

Apr 23 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (3)H24599 RAY AIR SUPPLY, INC. Principal Place of Business Mailing Address 3809 S NINE DR 38709 S NINE DR VALRICO FL 33594 VALRICO FL 33594 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/09/1984 4. FEI Number Applied For 59-2467893 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 27 Fee Required 22 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sigma\) No Personal Property Tax due June 30. 30 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAYMOND, RANDALL J. 3809 S NINE DR Street Address (P.O. Box Number is Not Acceptable) VALRICO FL 33594 **B3** 84 City 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. Thereby accept the appointment as registered agent. I am Juniah with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NCITE Hegistered Agent signature required when reinstating) 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TIME 1.17(1) RAYMOND, RANDALL J. 1.2 NAME NAME 3809 S DR NINE STREET ADDRESS 1.3 STREET ADDRESS VALRICO FL CITY - ST - ZIP 1.4 CITY-ST-ZIP TILLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME 23 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST-ZIP CITY-ST-7IF DELETE Addition TITLE 3 1 TITLE Change NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition THEF 4.1 TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST ZIP DELE 1E 5 1 TITLE Change Addition NAME 5 2 NAME STREET ADDRESS 5 3 STREET ADDRESS 5.4 CHY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 61 TITLE NAME 62 NAME STREET ADDRESS **63 STREET ADDRESS**

14.) 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

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