## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) **PROFIT** FILED FLORIDA DEPARTMENT OF STATE CORPORATION Sandra E Mortham ANNUAL REPORT 97 AUG -4 PH 2: 30 Secretary of State 1997 DIVISION OF CORPORATIONS SECRETARY OF STATE DOCUMENT # H49647 (1)TALLAHASSEE, FLORIDA JEANNINE RAYMOND INTERIORS, INC. Principal Place of Business Mailing Address 540 S.W. 11TH AVENUE 540 S.W. 11TH AVENUE P O BOX 1459 P O BOX 1459 FORT LAUDERDALE FL 33312 FORT LAUDERDALE FL 33312 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 03/29/1985 <u>05/31/1996</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-2535687 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28  $\Box$ Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current, year Intangible 24 25 30 Personal Property Tax due June 30 Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAYMOND, JEANNINE M. 540 S.W. 11TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FORT LAUDERDALE FL 33312 83 84 City 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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DP TITLE DELETE 1.1 TITLE Change Addition RAYMOND, JEANNINE 000002261040--6 NAME 1.2 NAME -08/07/97---01 100---025 540 S.W. 11TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS FORT LAUDERDALE FL \*\*\*\*\*\* [[] [] [] \*\*\*\*\*\*\*10.00 CITY-ST-ZIF 1.4 City-St-ZIP DELETE TITLE 2.1 THLE ☐ Chànge ☐ Addition OOOOO2261040----08/07/97--01100--026 NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS \*\*\*\*155.00 \*\*\*\*\*155,00 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE Change 3.1 Table Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP TITLE □ DELETE 4.1 TITLE ☐ Change \_\_ Addition NAME **4.2 NAME** STREET ADDRESS 4.3 STREET ADDRESS CITY-ST PIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE Addition 61 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 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 eath; 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.

## Ienunine Raymond

INTERIOR DESIGNER

Danser & Carpetition To whom it may Coverni' I recently received a " It notice "regarding the 1997 Roper Corp. annual Report. unfortunitely I have been recovering from Concer for the last 10 montal + hove been receiving clemotherapy in new york during this period. I have just returned to Florica when I received their notice. I realize that it is my responsibility to fee in time, have considering the encurratories mentioned that goverteration were be given, Exclaved in a cher for \$155.00 - she original fee. Without to June 97 the accument of 4550.00 in almost impounde Hor thork ganter Kullettion 54) 764-6200 • 540 S.W. 11th Avenue • Ft. Lauderdale, FL 33312-