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

PROFIT CORPORATION ANNUAL REPORT

1998

City & State

24



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(3)

RASON ENTERPRISES, INC.

Principal Place of Business	Mailing Address			
120 BONNIE LOCH CT. ORLANDO FL 32806 US	120 BONNIE LOCH CT. ORLANDO FL 32806 US	DO NOT WRITE IN THIS SPACE		
		3. Date Incorporated or Qualified		
		11/09/1987		
2. Principal Place of Business	2a. Mailing Address	4. FEI Number		
21	26	59-2855059		
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired S8.		
no.1	A=			

City & State

28

25 29 9. Name and Address of Current Registered Agent

ROACH, RAYMOND W 4205 HAVERSTRAW AVE.

ORLANDO FL 32812

	Personal Property Tax due June 30.
	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

6. Election Campaign Financing

Trust Fund Contribution

FILED

Jan 20 1998 8:00am

Secretary of State

8. This corporation owes or has paid the current year Intangible

Applied For Not Applicable \$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

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.

/NOTE Posistared Agost superfuse required when reportation

Country

30

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE	PST	☐ DELETE	1.1 TUTLE	☐ Change 🔀 Addition
NAME	ROACH, RAYMOND WILSON		1.2 NAME	
STREET ADDRESS	4205 HAVER\$TRAW AVENUE		1.3 STREET ADDRESS	a . 0 / 2
CHTY-ST-ZIP	ORLANDO FL		1.4 CITY - ST - ZIP	3281C
THLE	V	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAMÉ	ROACH, RONALD W		2.2 NAME	
STREET ADDRESS	4205 HAVERSTRAW AVE		2.3 STREET ADDRESS	20.012
CITY-ST-ZIP	ORLANDO FL		2. 4 CITY+ \$1 - ZIP	32 <i>812</i>
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY- \$1-7IP	
TITLE		DELFTE	4.1 TITLE	Change Addition
NAME			4. Ź NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TALE	- " "	DELETE "	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	

14. It 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

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6 1 1 ITEF

6.2 NAME

DELETE

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE NAME

1-8-GB

Change

Addition

CR2E034 (10/97)