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PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(7)

DRAY ASSOCIATES INC

FILED Mar 19 1998 8:00am Secretary of State

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Principal Place	e of Business	Mailing Address		 .			CIBIL BIBIL BIBI	
281 BRAOD A	WF S	281 BROAD AVE S						
NAPLES FL 33940 US		NAPLES FL 33940 US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
					01/09/1991			
2. Principal Pr	lace of Business	2a. Mailing Address		~ ~~~	4. FEI Number		Ar	plied For
211 8889	1 PEUGAN BAY BUYO	, 26 8889 Parc	AN B	MY BU	D 58-1922532		No	t Applicable
Suite, Apt.	#, otc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
	403	· -	103		5. Contineate of States 2031103		Fee Re	quired
City & State	JAPLES, FL	City & State	ES ,	FL	6. Election Campalgn Financing Trust Fund Contribution		\$5.00 Added	
Zip	Country	Zip	Count	•	8. This corporation owes or has p	_		
24 3	4108 25 USA		30	\mathcal{U}_{s}				No
	9, Name and Address of Curren		8	Name	10. Name and Address of New F	legistered /	agent	
	E PRENTICE-HALL CORPORATIO	n system inc.	(B)	iname				
1201 HAYS STREET			8:	Street Address (P.O. Box Number is Not Acceptable)				
	TE 105		8:	<u>a</u>				
TAL	LLAHASSEE FL 32301		*`	1				
			84	1 City		FL	85 Zip	Code
			s the shor		coration submits this statement for the		changing it	s registered
11 Pursuant t	to the provisions of Sections 607 050:	2 and 607 1508. Elorida Statute		ve-named cor	portation oddinita into diatorriorit for the	pa poco e.	Circuity in the	
11. Pursuant to office or re agent. I ar	to the provisions of Sections 607.0503 egistered agent, or both, in the State in familiar with, and accopt the obliga	2 and 607.1508, Florida Statute of Florida: Such change was a ations of, Section 607.0505, Flori History	uthorized t rida Statute	ve-named cor by the corpora es.	ation's board of directors. I hereby acc	ept the app	ointment as	registered
SIGNATURE							ointment as	registered
SIGNATURE	Signature, typed or printed many of registered age	on and true it applicable (NOTE	Registered A		pired when reinstating)	DATE		
SIGNATURE	Signature, typed or printed name of registered age OFFICERS AND	on and true it applicable (NOTE		gent signature requ	ured when reinstaling) ADDITIONS/CHANGES TO OFF	DATE		
SIGNATURE	Signature, typed or protect name of registered age OFFICERS AND	int and trie if applicable (NOTE D DIRECTORS	Hegislered A	gent signature requ	pired when reinstating)	DATE	DIRECTOR	S IN 12
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Block 12 or Block 13 if changed, or on an a tachment with Linda Ann Hamilton 3/12/98 941-513-2229

SIGNATURE: