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

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name P93000040324 (4)

GARALEE	E, INC.											
Principal Place of Business Mailing Address						1	e namerom ern amend filet amen monte colle do	ICI BIBII	0818 8 111	/(8 (8 3)	8191 1891	
714 WEST JEFFERSON ST. 714 WEST JEFFERSON ST BROOKSVILLE FL 34601 BROOKSVILLE FL 34601												
						<u> </u>	DO NOT WRITE IN	THIS S	PACE			
						3.	Date Incorporated or Qualified 06/01/1993					
2. Principal Plac	ce of Business	2a. Mailing Address				4.	FEI Number			Apr	olied For	
:1		26					59-1209907			Not	Applicable	
Suite, Apt. #,	etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired)	\$8.75 Additional Fee Required			
City & State		City & State					Election Campaign Financing Trust Fund Contribution)	\$5.00 May Be Added to Fees			
Zip 24	Country 25	Zip 29	30 Cot	intry		8. This corporation owes or has paid the current year Intang ble Personal Property Tax due June 30.						
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
714 WEST JEFFERSON ST. BROOKSVILLE FL 34601				82 83	Street Addr	ress (P.	O. Box Number is Not Acceptable)					
				84	City			FL	85	Zip C	ode	
11. Pursuant to office or reg agent. I am	the provisions of Sections 607 istered agent, or both, in the stamiliar with, and accept the company of the com	7.0502 and 607.1508, Florida St State of Florida Such change w obligations of, Section 607.0505	atutes, the al vas authorize 5, Florida Stat	bove d by tutes	e-named corp the corporat	oration tion's b	submits this statement for the purp oard of directors. I hereby accept th		changi cintmer	ing its	registered egistered	
SIGNATURE -	greature, typed or printed name of register	and accord and title of accordation	(NOTE: Registere	d Ace	ant signature requir	red when	reinstation)	ATE				
12,		S AND DIRECTORS	13.		- I - I - I - I - I - I - I - I - I - I		DDITIONS/CHANGES TO OFFICER		DIREC	CTORS	IN 12	
TITLE	PVS	DELETE	1.1 10	1.1 TITLE					Cha	ange	Addition	
NAME	BAILEY, MILDRED		1.2 N	AME	ĺ							
STREET ADDRESS	714 W. JEFFERSON ST		1.3 S	REET	ADDRESS							
CITY-ST-ZIP			1.4 C	1.4 CITY-ST-ZIP								
TITLE	DELETE 2			2.1 TITLE					Cha	ınge	Addition	
NAME	BAILEY, ALAN A.	, · · · · · · · · · · · · · · · · · · ·		2 NAME								
STREET ADDRESS			2.3 \$	2.3 STREET ADDRESS								
CITY-ST-ZIP	NEW YORK NY			ITY - S	ST-ZIP							
TITLE		DELETE	3.1 Ti	TLE				-	Cha	มกลูย	Addition	
NAME			3.2 N	AME	1							
STREET ADDRESS			3.3 \$	TAEET	ADDRESS							

6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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.

3 4. CITY - ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CRY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY - ST-ZIP

41 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

NAME

TITLE

NAME

Milded Bailey Mildred Wi Bailey

03/19/88

(352) 799-0722

Change

Change

Change

Addition

Addition

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FILED

Mar 25 1998 8:00am

Secretary of State