FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

P93000041153 (6) DOCUMENT #

1. Corporation Name

RABUN LABS, INCORPORATED

HABUN LABS	INCORPORATEL	,		
Principal Place of Business	S	Mailing Address		
4407 VINELAND RD	CAP	PIBZ VINELAND RD	See	
SUITE D-18	Below	Suite D-18 Orlando Fl 32911	Below	
ORI ANDO EL 39811	13-100	OUTPHINDS OF SEAST		2. Date Incorporated or Qualified 3a Date of Las

4407 VIUELAND RD SUITE D-18 ORLANDO FL 3881J	See Below	CHITE THE	elow	3. Date Incorporated or Qualified 07/01/1993	3a. Date of Last Report 05/01/1995
2. Principal Place of Busine	ess	2a. Mailing Address	0	4. FEI Number 58-1946665	Applied For
1 /5/6 Syor Suite, Apt. #, etc	ey ROAD	26 <i>P.O. BOX</i> 8 / Suite, Apt. #, etc.	x	5. Certificate of Status Desired	Not Applicable
City & State		City & State	. 61	6. Election Campaign Financing	\$5.00 May Be Added to Fees
3 Plant City 33567	Country 25 Hillsborn 9 H and Address of Surrent F	28 Plant City 29 335(04-088 30 Registered Agent	Country HIIIsborony	Trust Fund Contribution 8. This corporation has liability for in Florida Statutes Yes 10. Name and Address of New R	ntangible tax under s 199.032, ☐ No
YOUNG, DANNY 4407 VINELAND SUITE D-18 ORLANDO FL 32	J RD		83	Young, Danny J dress (P.O. Box Number is Not Accepted 516 Syoney Roa	. 85 Zip Cogig ,
				PlanT CiTy poration submits this statement for the pupard of directors. Thereby accept the app	FL 33566
STREET ADDRESS 5062	ig, glenda Ernst Ct	DIRECTORS DELETE	13. 1 1 11/14 1 2 NAME 1 3 STREEL ADDRESS	ADDITIONS/CHANGES TO OFF	Change 🔲 Addition
INTLE P NAME YOU STREET ADDRESS 5062	NDO FL NG, DANNY J. ERNST CT	□ DELFTE	2.2 NAME	1516 Sydney ROAD Dignt city FC 33	
CITY-ST-ZIP OHD TITLE NAME STREET ADDRESS	NDO FL	□ DECETE	3 1 TITLE 3 2 NAM! 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP		☐ Change ☐ Addition
CITY - ST-ZIP TITLE NAME STREET ADDRESS		DELETE.	4 1 THLE 42 NAME 43 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		□ DELETE	4 4 C/TY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP TITLE		DELETE	54 CHY-ST ZiP 6 1 HTLF		Change Addition

64 City ST-2P 64

SIGNATURE: SIGNATURE AND TYPED OR PRINTED THE OF SIGNING OFFICER OR DIRECTOR