

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

FILED

Feb 10 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P93000041153 (6)

1. Corporation Name

RABUN LABS, INCORPORATED

Principal Place of Business

Mailing Address

1516 SYDNEY ROAD
~~33564-0818~~
PLANT CITY FL 33567
US

P O BOX 818
PLANT CITY FL 33564-0818
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 1516 SYDNEY Rd

26 P.O. Box 818

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 PLANT CITY, FL

28 PLANT CITY, FL

Zip

Zip

24 33567

29 33564-0818

Country

Country

25 HILLSBOROUGH

30 HILLSBOROUGH

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

YOUNG, DANNY J
1516 SYDNEY ROAD
~~33564-0818~~
PLANT CITY FL 33568

81 Name
DANNY J. YOUNG

82 Street Address (P.O. Box Number is Not Acceptable)
1516 SYDNEY Rd

83

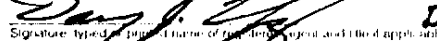
84 City
PLANT CITY

FL

85 Zip Code
33567

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



DANNY J. YOUNG, PRESIDENT

2/6/98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VPS	☐ DELETE
NAME	YOUNG, GLENDA	
STREET ADDRESS	1516 SYDNEY ROAD	
CITY - ST - ZIP	PLANT CITY FL	
TITLE	P	☐ DELETE
NAME	YOUNG, DANNY J.	
STREET ADDRESS	1516 SYDNEY RD	
CITY - ST - ZIP	PLANT CITY FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I 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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:



2/6/98

812-352-1502

CR2E034 (10/97)