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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1998 8:00am

Secretary of State

Change

Change

Addition

Addition

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000056736 (0)

R & B HALE & ASSOCIATES, INC.

Principal Place of Business Mailing Address 7042-A BALBOA DRIVE 7042-A BALBOA DRIVE ORLANDO FL 32018 ORLANDO FL 32818 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 08/12/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3192804 Not Applicable 21 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 25 29 30 Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HALE, BETTY M 7042-A BALBOA DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32818 83 **B4** City Zip Code 85 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) Signature, typed or protect came of togestered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11100 HALE, BETTY M 1.2 NAME CR2E034 NAME 7042-A BALBOA DR 1.3 STREET ADDRESS STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE Change Addition 2.1 TITLE TITLE TRYTEK, MICHELE R. NAME 2.2 NAME **815 HASKELL STREET** STREET ADDRESS 2.3 STREET ADDRESS ORLANDO FL CITY-ST-ZIP 2 4 City - St - ZiP DELETE Change Addition 3 1 11TLF TITLE HALE, D. REX NAME 32 NAME 7042-A BALBOA DR STREET ADDRESS 3.3 STREET ADDRESS **ORLANDO FL** CITY-ST-ZIP 3.4 CITY - \$1 - 7IP TITLE DITETE 4.1 TITLE Change Addition

6 4 CHY-ST-ZIP

14. Thereby 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 suppliemental 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.

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE 6.2 NAME

DELETE

DILETE

4.3 STHEET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY- ST- ZIP

4.4 CITY-ST-ZIP

MATURE DAY M. C. D. PRULLING PROPERT 4-15-98 29C-9