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

PROFIT CORPORATION ANNUAL REPORT

3

TATLE

NAME

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # P93000079257 (0) PHYLLIS RAY & ASSOCIATES, INC. Principal Place of Business Mailing Address 3150 22ND ST N 3150 22ND ST N ST PETERSBURG FL 33713 ST PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/17/1993 Applied For 2. Principal Place of Business 2a. Mailing Address 21 26 59-3213972 Not Applicable Suite, Apt. #, etc Suite, Apt. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Country Z_{1D} 8. This corporation owes or has paid the current year Intangible 24 25 Personal Property Tax due June 30. Yes 30 29 Name and Address of New Registered Agent g, Name and Address of Current Registered Agent Name RAY, PHYLLIS 3150 22ND ST N 62 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33713 85 Zip Code 84 City 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 Signature, typed or ponted name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1.1 TITLE Change Addition RAY, PHYLLIS NAME 1.2 NAME 3150 22ND ST N STREET ADDRESS 1.3 STREET ADDRESS ST PETERSBURG FL 33713 14 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 21 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ■ Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change DELETE 4.1 TITLE Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP

6.4 CITY-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 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.

5.1 TITLE

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE

62 NAME

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

DELETE

DELETE

SIGNATURE: Phyllis I. Ray

4/5/98 813)896-2722

Change

Change

Addition

Addition

FILED

Apr 13 1998 8:00am

CR2E034