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

PROFIT CORPORATION **ANNUAL REPORT**

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000039764 (3)

R & R SPRAY SERVICES, INC. Principal Place of Business Mailing Address 134 CLARET CT. 134 CLARET CT. ORLANDO FL 32807 ORLANDO FL 32807 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>05/23/1994</u> 2. Principal Place of Business 2a. Mailing Address Applied For 59-3252532 21 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 Trust Fund Contribution Added to Fees Country Country Z_{1D} 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. Yes 25 30 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name EDWARDS, RICHARD 134 CLARET CT. Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32807 City 85 Zip Code 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 printed name of registered agent and life if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. DELETE TITLE Change Addition **EDWARDS, RICHARD** NAME 1.2 NAME 134 CLARET CT. 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32807 1.4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-2IP 2. 4 CITY - ST - ZIP DELETE Change Addition 31 TITLE TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITI F 61 TITLE

14. Thereby 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 trueton 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 man attraction with an address

62 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

NAME

STREET ADDRESS

CITY-ST-2IP

KICHALD A HUSTON

1-407-384-8360

FILED

Apr 13 1998 8:00am

Secretary of State