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

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporate	MENT # P940 RA INTERNATIONAL, INC.	00052171 (	3)			IIHE KARK KHIK CAAL KA KATÈ
Principal Place of Business Mailing Address					a reduceda são relici despir entris destir destir 98%) (	PRAMA DINDRA TROPIA PONTARI INDRA APONI
22051 U.S. HIGHWAY 19 NORTH CLEARWATER FL 34825-2342		22051 U.S. HIGHWA	22051 U.S. HIGHWAY 19 NORTH CLEARWATER FL 34625-2342		DO NOT WRITE IN THE	S SPACE
					<ol> <li>Date Incorporated or Qualified</li> <li>07/14/1994</li> </ol>	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3253376	Not Applicable
Suite, Apt	#, etc	Suite, Apt #, etc	).		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	to	City & State	············			<del></del>
23		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ	Country	Zip	Cour	itry	<ol><li>This corporation owes or has paid the c</li></ol>	
24	25	29	30		Personal Property Tax due June 30.	Yes No
	g. Name and Address of Cui	rrent Registered Agent		B1 Name	10. Name and Address of New Registere	d Agent
	:051 U.S. Highway 19 Norti Jearwater FL 34625-2342	••		B3	ddress (P.O. Box Number is Not Acceptable)	
			T	B4 City	F	85 Zip Code
SIGNATURE	Signature, typed or printed frame of registered	d agent and little if applicable	(NOTE Registered		orporation submits this statement for the purpose ration's board of directors. I hereby accept the appropriate the purpose ration's board of directors. I hereby accept the appropriate the purpose of the purpose ration is board of directors.	
TITLE	PD	AND DIRECTORS  DELETI	13.	<u>.                                      </u>	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12  Change Addition
	LONG, TERRY L	L VECETI	1.1 TITL			L Criange L Advition
NAME	22051 U.S. HIGHWAY 19	NODTH		·- }		
STREET ADDRESS	CLEARWATER FL	HORIT		EET ADDRESS		
CITY-ST-ZIP TITLE	VP VP	DELET		-ST-ZIP	<del></del>	Change Addition
	FRYMAN, MARSHALL	LJ DELEII	2			Therefor The Address to
NAME CIDELY ADDRESS	220501 US HWY-19 N		2 2 NAN	1		
STREET ADDRESS	CLEARWATER FL			EET ADDRESS		
CITY-ST-ZIP	D	DELET		Y-ST-ZIP	·	☐ Change ☐ Addition
NAME	LONG, WAYNE		3.1 MIZ			C Change C Addition
	22051 US HWY 19 N		1	1		
STREET ADDRESS	CLEARWATER FL			EET ADDRESS		
CITY - ST - ZIP TITLE	ST ST	DELETI		Y-ST-ZIP		Change Addition
NAME	BAILEY, CLIVE	i otten	4.1 IIIL			C CHANGE LI MUDICION
	22051 US HWY N					
STREET ADORESS				EET ADDRESS		
City-St-ZiP	CLEARWATER FL	DELET		-ST-ZIP		Change Addison
TITLE	D COAN	☐ bfreu				Change Addition
NAME	KUNG, JOAN		5.2 NAM			
CTREET ANDRESS	I ZZENI LIN MWY IU N		■ £ 2 €TD	CET ADODESS		

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 roceiver 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 clarifyed, or on an attacking in a address

54 CITY-ST-ZIP

63 STREET ADDRESS

6.1 TITLE

DELETE

SIGNATUR

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS **CLEARWATER FL** 

CLIVE R. BAILEY

4-13-90 813-791-3332

Change

Addition

**FILED** 

Apr 20 1998 8:00am

Secretary of State