

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Jul 14 1998 8:00am  
Secretary of State

DOCUMENT # **P94000059765 (5)**

1. Corporation Name  
**IMANI INDUSTRIES, INC.**



Principal Place of Business

**312 PLUM STREET  
THOMASVILLE GA 31792**

Mailing Address

**P.O. BOX 2017  
THOMASVILLE GA 31799-2017  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**08/11/1994**

4. FEI Number

**58-2135402**

Applied For

☐ Not Applicable

5. Certificate of Status Desired



**\$8.75** Additional  
Fee Required

6. Election Campaign Financing



**\$5.00** May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.



9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DAWSON, LETA  
3007 SHAMROCK NORTH  
#10  
TALLAHASSEE FL 32308**

81 Name

82 Street Address (P.O. Box Number Is Not Acceptable)

83

84 City

**FL**

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE  
NAME **WARD, CHARLIE JR.**  
STREET ADDRESS **312 PLUM STREET**  
CITY-ST-ZIP **THOMASVILLE GA 31792**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **WARD, WILLARD**  
STREET ADDRESS **312 PLUM STREET**  
CITY-ST-ZIP **THOMASVILLE GA 31792**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **DAWSON, LETA**  
STREET ADDRESS **3007 SHAMROCK NORTH #10**  
CITY-ST-ZIP **TALLAHASSEE FL 32308**

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
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

*[Signature]*

**500002589755**  
**-07/15/98--01058--018**  
**\*\*\*150.00**

**7/2/98** (am) *[Signature]*

CR2E034 (5/98)

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**Imani Industries, Inc.  
Post Office Box 2017  
Thomasville, GA 31799**

July 2, 1998

Division of Corporations  
Annual Reports Filings  
P. O. Box 6327  
Tallahassee, FL 32314

Dear Sirs:

We received in the mail today a second notice for our Corporate Annual Report for 1998.  
Enclosed please find a check for the \$150.00 annual filing fee and the signed annual report form.  
We did not receive a first mailing and kindly request the penalty of \$400.00 being waived.

Thank you for your assistance with this matter.

Sincerely,

*Willard Ward*

Willard Ward, President