## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000017061 (9)

BLACK AND RAIDY INC

Principal Place of Business

3813 PERIWINKLE LANE

Mailing Address

## **FILED** Sep 16 1997 8:00am Secretary of State



3813 PERIWINKLE LANE **DELRAY BEACH FL 33483** DELRAY BEACH FL 33483 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 02/27/1995 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For IM COLDWIAL CLUB DR 21 PO BOX 1556 65-0557509 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 4 101 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Ee BOYUTOW BEACH DELRAY BEACH 23 П 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 33435 33447 29 30 Personal Property Tax due June 30. ☐ Yes X No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent RAIDY, PETER J 81 CHEMPSTE 13 MACK 3813 PERIWINKLE LANE Street Address (P.O. Box Number is Not Acceptable) 82 **DELRAY BEACH FL 33483** 83 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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 607.0585 Florida Statules. City SIGNATURE LIM STEPHEN BLOCK equired when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TΠIF DELETE DRESIDENT 1.1 TITLE Change RAIDY, PETER J WINSTEDHEW BLACK NAME 1.2 NAME 3813 PERIWINKLE LANE 33 COLOWIAL CLUB DR STREET ADDRESS 1.3 STREET ADDRESS DELRAY BEACH FL FL 33435 CITY-ST-ZIP BOUNTON BEAULT 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change U-ÞR2S NAME 2.2 NAME ROD THOULDSOD 7 COLODIAL CLUB DR STREET ADDRESS 2.3 STREET ADDRESS るちりろう BOUNTON BEACH CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE MAGT + 338 WHA CHORNIAMONT SOUR NAME 3.2 NAME 101 14 COLOWAL CLUB DR STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP BODDIEW BEAKH TITLE DELETE 4.1 TITLE Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP . DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. I do 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 op an altag ent with an ac