SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORPORATION **ANNUAL REPORT**



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

1996

DOCUMENT # P95000019747 (1)

S & G RAGEL PLACE INC

Principa: Place	of Business	Mailing Address	13438 W. OAKLAND PARK BLVD.				
8438 W. OAKLI Sunirise FL 30	and Park Blvd. 3351	8438 W. OAKLAND PARK SUNRISE FL 33351					
					3. Date incorporated or Qualified 03/09/1995	3a. Date of Last Report	
<u>.</u>	ace of Business	2ε. Mailing Address			4. FEI Number	Applied For	
Suite Act & cla		26 Cuita Ani # oto	Suite, Apt # etc		65-056897	Not Applicable \$8.75 Additional	
Suite, Apt. #, etc.		27 Suite, Apr. # etc		5. Certificate of Status Desired	Fee Required		
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be	
<u> </u>		28			Trust Fund Contribution	Added to Fees	
Zip T	Country	Zip	Counti	У	8. This corporation has liability for	antangible tax under s. 199.032, . X Yes □ No	
	25 9. Name and Address of Curre	29 ent Registered Agent	30		Florida Statutes 10. Name and Address of New Re	<u> </u>	
- 5 1101		cin riegistered Agent	8	Name			
HOLMAN, STEVEN M			8:	Stroot Add	ress (P.O. Box Number is Not Accepta	hle)	
S 8 7803 N.W. 70TH TERRACE PH. TAMARAC FL 33321				Sileet Add	ress (1.0. Box redinber is not necepta		
124M	IMINO FL 00021		8	3			
			6.	4 City		85 Zip Code	
					poration submits this statement for the p	FL "	
SIGNATURE	in familiar with, and accept the obli Signate typed epicted rate they decide OFFICERS A				red was reach rep ADDITIONS/CHANGES TO OFF	DATE	
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TREET ADDRESS	7803 N.W. 70TH TERRACE		13 STHE	ET ADORESS			
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CITY - ST - ZIP	TAMARAC FL 33321		2 4 City	1			
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NAME			5.2 NAM	E			
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NAME STREET ADDRESS			1	ET ADDRESS			
CITY-ST-ZIP				- ST - ZiP			
44 Ldo barah	by certify that the information supp	lied with this filing is voluntarily fo	irrushed and	does not aux	alify for the exemption stated in Section	115 07(3)(k), Florida Statutes I	
made unc	der oath, that I am an officer or dire	actor of the corporation or the rec	ceiver or trus	itee empawere	and accurate and that my signature shed to execute this report as required by	r Chapter 617, Flor oa Statutes, an	
that my na	ame appears in Block1	is it chariged, or on an attachme	ent with an a	poress	$\sim 1 - 1$	\mathcal{L}	
SIGNAT	URE: Alwen	Ili Holman			8/5/96 (954)748-3229	
J.W.1771	SIGNATURE AND TYPED	OR PRINT TO NAME OF SIGNING OFFICE	A OR DIRECTOR		1 / 108	As Since Proceed	