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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000034152 (5)

4 BOYS ENTERPRISES INC.

Principal Place of Business

Mailing Address

FILED Jan 15 1998 8:00am Secretary of State



424 S. NOVA ROAD DAYTONA BEACH FL 32114-4514		424 S. NOVA ROAD DAYTONA BEACH FL 32114-4514		DO NOT WRITE IN THIS	SPACE -			
					3. Date Incorporated or Qualified 05/02/1995			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Ar	plied For	
21		26		59-3309173		t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stat		City & State			Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Zip 24	Country 25	Zip 29	Counti	у		☐ Yes [angible No	
9. Name and Address of Current Registered Agent DIDDEON, DCDODALI 81					10. Name and Address of New Registered Agent			
RIPPEON, DEBORAH				Name				
794 STERLING CHASE DR. PORT ORANGE FL 32124			8:		dress (P.O. Box Number is Not Acceptable)			
[83	3				
			84	'	FL	- `	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								
BIGITATIONE.	Signature, typed or printed name of registered agen		E. Registered A	jent signature req	uired when reinstating) DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS ANI		-	
TITLE	PTD	☐ DELETE	1.1 TITLE			Change	Addition	
NAME	RIPPEON, STERLING		1.2 NAME					
STREET ADDRESS	794 STERLING CHASE DR.			T ADDRESS				
CITY-ST-ZIP	PORT ORANGE FL 32124	Lociere	1.4 CITY-	ST-ZIP	.	Channa	Addition	
TITLE	VSD DELETE		2.1 TITLE			Change	Addition	
NAME	RIPPEON, DEBORAH		2.2 NAME					
STREET ADDRESS	794 STERLING CHASE DR. PORT ORANGE FL 32124			T ADDRESS	•			
CITY-ST-ZIP	FORT ORANGE PL 32124	DELETE	2, 4 CITY	-ST-ZIP		Change	Addition	
TITLE			3,1 TITLE	1		□ cuarite	Addition	
NAME			3.2 NAME	ì				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		DELETE	3.4. CITY 4.1 TOTLE	-ST-ZIP	, , , , , , , , , , , , , , , , , , ,	Change	Addition	
		□ DELETE	4.1 IEEE	.		ட்டி புழுதித		
NAME CYDYCT ADDDCCC								
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		_ DELETE	4,4 CITY- 5,1 TITLE	01-ZiP		Change	Addition	
NAME			5.1 HILE 5.2 NAME			onengo		
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP			5.4 CITY -					
TITLE		☐ DELETE	6,1 TITLE	U1-41F	2020men 12 1217 mi	Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS				T ADDRESS				
			3					
CITY-ST-ZIP			6.4 CITY -	31-ZIF				

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 shanged, or on an attachment with an address.