## 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 #**1. Corporation Name

P95000057012 (3)

TRAY VALET, INC.

Principal Place of Business	Mailing Address		
585 TECHNOLOGY PARK DRIVE SUITE 105 LAKE MARY FL 32746-8236 US	585 TECHNOLOGY PARK DRIVE Suite 105 Lake Mary Fl 32746-6236 US		
Principal Place of Business	2a. Mailing Address		
1	26		
Suite Ant # etc	Cuite Act # cte		

**FILED** Apr 24 1998 8:00am Secretary of State



585 TECHNOLOGY PARK DRIVE SUITE 105 LAKE MARY FL 32746-8236 US		SUITE 105	LAKE MARY FL 32746-6236			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  07/24/1995					
<del></del>	lace of Business	2a. Mailing Address				4. FEI Number	T	Ar	oplied For		
21		26				59-3328006		No	ot Applicable		
Suite, Apt	·	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired		
City & Stat		City & State	28			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zip 24	Country 25	Zip 29	Country 30	Personal Property Tax due June 30. Yes 🔼 N							
<b></b>	9, Name and Address of Cu	rrent Registered Agent		_		10. Name and Address of New Registered A	gent				
	RDY, TOBY R	_	B1	1	Name						
585 TECHNOLOGY PARK DRIVE Suite 105			82		Street Addr	ress (P.O. Box Number is Not Acceptable)			-		
į LAI	KE MARY FL 32748		83	1							
			84	+	City	FL	85	Zip	Code		
11. Pursuant office or r agent I a SIGNATURE	to the provisions of Sections 607, egistered agent, or both, in the S m familiar with, and accept the of Signature, typed or printed name of registering	oligations of, Section 607,0505, F	riorida Statute	9S.	•	coration submits this statement for the purpose of a tion's board of directors. I hereby accept the apported when reinstating)	chanç intme	ging it ent as	s registered registered		
12.		AND DIRECTORS	13.		- arginaro rodon	ADDITIONS/CHANGES TO OFFICERS AND	DIRE	CTOR	S IN 12		
TITLE	PCD	☐ DELETE	11 TITLE	-	<del></del>		Tich		Addition		
NAME	HARDY, TOBY R		1,2 NAME			_					
STREET ADDRESS 585 TECHNOLOGY PARK DRIVE SUITE 105			1	REET ADDRESS							
CITY-ST-ZIP	LAKE MARY FL		1.4 CITY-5								
TITLE	VPSD	DELETE	21 TITLE				Ch	ange	Addition		
NAME	HARDY, SUSAN T		2.2 NAME					•			
STREET ADDRESS				T A!	ADDRESS						
CITY-ST-ZIP	LAKE MARY FL		2. 4 CITY -								
TITLE		☐ DELETE	3.1 TITLE				Ch	ange	Addition		
NAME			3.2 NAME						İ		
STREET ADDRESS			3.3 STREET	i ai	.DDAESS						
CITY-ST-ZIP			3.4. CITY-	ST-	ZIP						
TITLE		DELETE	4.1 TITLE				Chá	ange	Addition		
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET	ìΑſ	DDRESS						
CITY-ST-ZIP			4.4 CfTY - S	ŝT-	·ZIP						
TITLE		☐ DELETE	5 1 TITLE				Cha	inge	☐ Addition		
NAME			5.2 NAME						]		
STREET ADDRESS			5 3 STREET	ίΑΙ	DDRESS				İ		
CITY - ST - ZIP			5.4 CITY - 9	٠T;	ZIP				}		
TITLE		☐ DELETE	6 1 TITLE				Cha	inge	☐ Addition		
NAME			62 NAME		l						
STREET ADDRESS			63 STREET	14 1	DDAESS				İ		
COTY OF 710											

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 of 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 of an attachment with an address.

SIGNATURE: