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

PROFIT CORPORATION ANNUAL REPORT

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P95000065324 (2)

RAQUETTE SALES INTERNATIONAL, INC. Principal Place of Business Mailing Address 1801 CLINT MOORE RD 1801 CLINT MOORE RD SUITE 200 SUITE 200 **BOCA RATON FL 33487 BOCA RATON FL 33487** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/22/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 1801 Clint Moore 65-0605276 Not Applicable 26 Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Z(p)Country Zip This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CODRON, LUCILLE 1801 CLINT MOORE RD 82 Street Address (P.O. Box Number is Not Acceptable) SUIYTE 200 В3 **BOCA RATON FL 33487** 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or proted name of registered agent and title if applicable (NOTt: Registered Agent signature required when reinstating) CR2E034 (10/97 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Addition TITLE 1.1 TITLE CODRON, LUCILLE NAME 12 NAME 4500 NW 24TH TER STREET ADDRESS 13 STHEET ADDRESS **BOCA RATON FL 33431** 14 City-St-7IP CITY-ST-ZIP D DELETE Change Addition TITLE 2.1 TITLE CODRON, KEITH 2.2 NAME NAME 1 SIROS STREET ADDRESS 2.3 STREET ADDRESS LAGUNA NIGUEL CA 92677 CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4, CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Addition TITLE

CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby 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 suppliemental 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 or an attachment with an address.

5.2 NAME

61 TITLE 6.2 NAME

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

7/. 2/. .2

Addition

Change

FILED

Apr 02 1998 8:00am

Secretary of State