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

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # P95000071019 (0)

1. Corporation Name
REWARDING AUDITS, INC.

Principal Place of Business
2230 ORANGESIDE RD
PALM HARBOR FL 34683
US

Mailing Address
35246 US HWY 19 N
SUITE 318
PALM HARBOR FL 34684
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
09/14/1995

2. Principal Place of Business
21 *1917 11TH STREET SW*
Suite, Apt. #, etc.
22

2a. Mailing Address
26 *P.O. BOX 5015*
Suite, Apt. #, etc.
27

4. FEI Number
59-3334394
☐ Applied For
☐ Not Applicable

City & State
23 *LARGO, FL*
Zip
24 *33778*
Country
25 *USA*

City & State
28 *LARGO FL*
Zip
29 *33779*
Country
30 *USA*

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

WARD, TERESA
2230 ORANGESIDE RD
PALM HARBOR FL 34683

10. Name and Address of New Registered Agent

81 Name *TERESA M. WARD*
82 Street Address (P.O. Box Number is Not Acceptable) *1917 11TH STREET SW*
83
84 City *LARGO*   FL   85 Zip Code *33778*

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 *Teresa M. Ward TERESA M. WARD, PRESIDENT*   *1/7/98*
Signature typed or printed name of registered agent and title if applicable   (NOTE: Registered Agent signature required when reinstating)   DATE

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD ☐ DELETE	1.1 TITLE		☒ Change ☐ Addition
NAME	WARD, TERESA M	1.2 NAME		
STREET ADDRESS	2230 ORANGESIDE RD	1.3 STREET ADDRESS	~~~~ *1917 11TH STREET SW*	
CITY-ST-ZIP	PALM HARBOR FL	1.4 CITY-ST-ZIP	*LARGO, FL 33778*	
TITLE	VSD ☐ DELETE	2.1 TITLE		☒ Change ☐ Addition
NAME	EATON, EGERTON R	2.2 NAME		
STREET ADDRESS	2230 ORANGE SIDE RD	2.3 STREET ADDRESS	*1917 11TH STREET SW*	
CITY-ST-ZIP	PALM HARBOR FL	2.4 CITY-ST-ZIP	*LARGO, FL 33778*	
TITLE	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

CR2E034 (10/97)

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 changed, or on an attachment with an address.

SIGNATURE: *Teresa M Ward, TERESA M WARD*   *1/7/98*   *813-585-5000*