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

Mailing Address

7400 GEORGIA AVENUE

WEST PALM BEACH FL 33405-4563

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

WEST PALM BEACH FL 33405

7400 GEORGIA AVENUE

CITY-S1-ZIP

STREET ADDRESS

STREET ADDRESS City - ST - 7IP

SIGNATURE:

CITY-ST-ZIP

THILE

NAME

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000054840 (9)

RITEWAY SAFETY FILM SYSTEMS, INC.

4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0678101 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country Zip Zip This corporation has liability for intangible tax under s. 199.032, ☐ Yes 🔼 No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CURRY, DANIEL A IV 7400 GEORGIA AVENUE Street Address (P.O. Box Number is Not Acceptable) 83 WEST PALM BEACH FL 33405 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE: Flegistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) (96/6) DELETE Change Addition 1.1 TITLE THEF CURRY, DANIEL A IV NAME 1.2 NAME 7400 GEORGIA AVE, #J 1.3 STREET ADDRESS STREET ADDRESS. WEST PALM BEACH FL 33405 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TIEFE 2.2 NAME 2.3 STREET ADDRESS STREET ADORESS 2. 4 CITY-ST-ZIP CHY-ST-ZP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY- ST-2IP CITY - \$1 - ZIP DELETE Change Addition 4.1 TITLE THLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS

44 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 City-ST-ZIP

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.

LOUIFIED DANIEL A Chry 4-29-97 (541) 586-1217

5.4 CITY-ST-ZIP

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

14. I do 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

DELETE

DELETE

FILED
May 09 1997 8:00am
Secretary of State

3a. Date of Last Report

Change

Change

Addition

Addition



3. Date Incorporated or Qualified

06/26/1996