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 # 1. Corporation Name P97000004242 (8)

RALBY ASSET MANAGEMENT, INC.

FILED Mar 12 1998 8:00am Secretary of State

Principal Place of Business			Mailing Address			<u> </u>	
2999 N.E. 191ST STREET			2999 N.E. 191ST STREET				
PENTHOUSE 8 AVENUTURA FL 33180			PENTHOUSE 8 AVENUTURA FL 33180				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
9 Principal P	lace of Business	1 35	Mailing Address				01/15/1997 4. FEI Number - 0.1.0.1 Applied For
21	lace of business	26	₁				4. FEI Number 0728186 Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			- · · · · · · · · · · · · · · · · · · ·	\$8.75 Additional
22		27					5. Certificate of Status Desired Fee Required
City & State	e		City & State				Election Campaign Financing Trust Fund Contribution Added to Fees
Zip	Country	28	Zip Country				Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible
24	25	29	•	30			Personal Property Tax due June 30. Yes No
	9, Name and Address of Curren	nt Registe	ered Agent				10. Name and Address of New Registered Agent
	uth florida registered agi	ENTS			61	Name	
200 E. LAS OLAS BOULEVARD					62	Street Add	dress (P.O. Box Number is Not Acceptable)
	ITE 1900 RT Lauderdale FL 33301				B3		
"	HI LAUDENDALE PL 33301					A 11	
					64	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits to office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directions.							rporation submits this statement for the purpose of changing its registered
agent. I a	m familiar with, and accept the oblig	ations of,	Section 607.0505, F	lorida Statu	ites		alion's board of directors. Thereby accept the appointment as registered
SIGNATURE	****						
12.	Signature, typed or printed harve of registered age OFFICERS ANI			13.	Ager	nt signature requ	uired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D		DELETE	1.1 TH	.E		☐ Change ☐ Addition
NAME	RALBY, MICHAEL			1.2 NA	ME		
STREET ADDRESS	2999 N.E. 191ST STREET, PE	NTHOU	SE 8			ADDRESS	
CITY-S1-ZIP	AVENUTURA FL 33180		DELETE	1.4 Cff		- ZIP	Change Addition
NAME			otten		2.1 TITLE 2.2 NAME		Citalige Ci Abdition
STREET ADDRESS						ADDRESS	
CITY+SI-ZIP				2. 4 CI	Y-\$	1 - Z(P	
TITLE			DELETE	3.1 1(1)	.E		☐ Change ☐ Addition
NAME				3.2 NAI		İ	
STREET ADDRESS						ADDRESS	
CITY-ST-ZIP TITLE			DELETE	3.4. Ci1 4.1 Tiff		1-ZIP	☐ Change ☐ Addition
NAME				4. 2 NA			
STREET ADDRESS						address	
CITY-ST-ZIP				4.4 CIT			
TITLE			DELETE	5.1 TITI			Change Addition
NAME				5.2 NAJ			
STREET ADDRESS				1		ADDRESS	•
CITY-ST-ZIP TITLE			DELETE	5.4 CIT 6.1 TITI		- ZIP	Change Addition
NAME				6.2 NA			- July Starte
STREET ADDRESS						ADDRESS	

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 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 occupyor 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 attachnest with an address.

CITY-ST-ZIP