

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000006317 (6)

1. Corporation Name
AAA RITEWAY INC.



Principal Place of Business 3279 S.W. 14TH PLACE BOYNTON BEACH FL	Mailing Address 3279 S.W. 14TH PLACE BOYNTON BEACH FL
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 614 Allen Ave Suite, Apt. #, etc. 22 Delray Bch, FL City & State 23 33483 Zip 24		2a. Mailing Address 26 Same Suite, Apt. #, etc. 27 City & State 28 Zip 29		3. Date Incorporated or Qualified 01/15/1997	
25		30		4. FEI Number 65-0717213 Applied For Not Applicable	
Country		Country		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 ROTUNDO, DANIEL A 3279 S.W. 14TH PLACE BOYNTON BEACH FL		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ROTUNDO, DANIEL A	1.1 TITLE	
NAME	568 E. WOOLBRIGHT RD.	1.2 NAME	
STREET ADDRESS	BOYNTON BEACH FL 33435	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D ROTUNDO, DANIEL ANTHONY	2.1 TITLE	
NAME	9202 MASTERS PASS CT.	2.2 NAME	
STREET ADDRESS	SNELLVILLE GA 30278	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 _____ Daniel A Rotundo

CF2E034 (10/97)