

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

FILED  
Apr 28 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # P97000010573 (8)

1. Corporation Name  
RENEE RAFFAELE, INC.



Principal Place of Business  
3301 EMERALD POINT DRIVE  
STE 104A  
HOLLYWOOD FL 33021

Mailing Address  
3201 EMERALD POINT DRIVE  
STE 104A  
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/30/1997

4. FEI Number

65-0719580

Applied For

Not Applicable

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

2. Principal Place of Business

21 1532 GABRIEL ST.

Suite, Apt. #, etc.

City & State

23 HOLLYWOOD, FL

24 33020

Country

25 USA

2a. Mailing Address

26 1532 GABRIEL ST.

Suite, Apt. #, etc.

City & State

28 HOLLYWOOD, FL

29 33020

Country

30 USA

9. Name and Address of Current Registered Agent

RAFFAELE, RENEE  
3201 EMERALD POINT DRIVE  
STE 104A  
HOLLYWOOD FL 33021

} SAME AGENT BUT  
NEW ADDRESS

10. Name and Address of New Registered Agent

81 Name

RENEE RAFFAELE (SAME)

82 Street Address (P.O. Box Number is Not Acceptable)

1532 GABRIEL STREET

84 City

HOLLYWOOD,

FL

85 Zip Code

33020

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD  
NAME RAFFAELE, RENEE  
STREET ADDRESS 3201 EMERALD POINT DRIVE  
CITY-ST-ZIP HOLLYWOOD FL 33021

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SAME  
1.2 NAME SAME  
1.3 STREET ADDRESS 1532 GABRIEL STREET  
1.4 CITY-ST-ZIP HOLLYWOOD, FL 33020

☒ Change ☐ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 Renee Raffaele 10 April 1998 (654) 922-0890

CR2E034 (10/97)