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PROFIT
CORPORATION
ANNUAL REPORT



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9700030282 (2)

R. I. WILLIAMS AND ASSOCIATES, INC.

FILED Apr 14 1998 8:00am Secretary of State

Principal Place of Business Mailing Address 4410 NW 67TH TERRACE 4410 NW 67TH TERRACE LAUDERHILL FL 33319 LAUDERHILL FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/26/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 Not Applicable 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 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 25 29 24 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BENSON, HAYWARD J JR 4410 NW 67TH TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) LAUDERHILL FL 33319 63 City 85 Zip Code FL 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) Signature, typed or printed nanie of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELFTE Change Addition TITLE 11 TITLE WILLIAMS, ROBERT I NAME 1.2 NAME 10 W GLENSIDE AVE #203 STREET ADDRESS 1.3 STREET ADDRESS **GLENSIDE PA 19038** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change ■ Addition TITLE **WILLIAMS. BELINDA** NAME 2.2 NAME 10 W GLENSIDE AVE #203 2.3 STREET ADDRESS STREET ADDRESS **GLENSIDE PA 19038** CITY-ST-ZIP 2 4 CITY-ST-ZIP T OLLETE ☐ Addition 3 1 TITLE Change TITLE NAME BENSON, HAYWARD J JR 3.2 NAME 4410 NW 67TH TERRACE STREET ADDRESS 3 3 STREET ADDRESS LAUDERHILL FL 33319 CITY-ST-ZIP 3.4. CITY - ST - ZIP Addition DELFTE Change TITLE 4.1 THLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-S1-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition Change TITLE 6.1 THILE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CHY-ST-14. Thereby certify that the information supplied with this filing does not qualify for the exemption indicated on this annual report to suppliemental annual leport is fue and accurate and that officer or director of the corporation or the receiver or tripstee on powered to execute this relaced to 2 or Block 13 if changed, or on an attachment with an appliess. in stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information my signature shall have the same legal effect as if made under oath; that I am an epop as required by Chapter 607, Florida Statutes; and that my name appears in

Block 12 or Block 13 in Charliffett, or On all attriction of the all authorises.

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