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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 22 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P97000037599 (2)

RELIABLE WORKS, INC.

STREET ADDRESS.

CITY-ST-ZIP

Principal Place of Business Mailing Address 14742 SOUTH BISCAYNE RIVER DRIVE 14742 SOUTH BISCAYNE RIVER DRIVE C/O ADRIENNE SWAIN C/O ADRIENNE SWAIN MIAMI FL 33168 MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/25/1997 Principal Place of Business 2a. Mailing Address FEI Number Applied For 65-0756034 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 X No Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 SWAIN, ADRIENNE 14742 SOUTH BISCAYNE RIVER DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33168 83 84 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE 1.1 TITLE President/Director Channe Addition NAME 1.2 NAME Roger Mann R2E034 STREET ADDRESS 1.3 STREET ADDRESS 14742 South Biscayne River Dr. CITY-ST-ZIP <u>Miami, Florida 33168</u> 1.4 CITY-ST-7IP DELETE THIE Secretary 2.1 TITLE Change Addition NAME Adrienne Swain 2.2 NAME STREET ADDRESS 14742 South Biscayne River Dr. 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP Miami, Florida 33168 TITLE DELETE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP TITLE DELETE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE ☐ Change \_\_\_ Addition 6.1 TITLE NAME 62 NAME

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:

1/16/98 305–841–9801

6.3 STREET ADDRESS

6,4 CiTY-ST-ZIP