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

FILED Feb 02 1998 8:00am Secretary of State

| DOCUMENT # P97000051872 (4) 1. Corporation Name VERCHEL, INC. | |
|--|--------------------------------|
| Principal Place of Business Mailing Address | |
| 8546 LEO KIDD AVE. 8546 LEO KIDD AVE. | |
| PORT RICHEY FL 34668 PORT RICHEY FL 34688 DO NOT WRITE IN THIS | SPACE |
| 3. Date Incorporated or Qualified | , SI AOL |
| 06/10/1997 | |
| 2. Principal Place of Business 2a. Mailing Address 4. FEI Number | Applied For |
| 21 26 59-3454278 | Not Applicable |
| Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired | \$8.75 Additional |
| 22 27 | Fee Required |
| City & State City & State 6, Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip Country Zip Country 8. This corporation owes or has paid the cu | |
| | ☐ Yes ☐ No |
| 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered | i Agent |
| TORRENCE, ALFRED W JR. 81 Name | |
| 6645 RIDGE RD. 82 Street Address (P.O. Box Number is Not Acceptable) | |
| PORT RICHEY FL 34668 | |
|) · · · · · · · · · · · · · · · · · · · | |
| 84 City | 85 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 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 apagent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. | pointment as registered |
| SIGNATURE | ļ |
| Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | |
| 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AN | Change Addition |
| AH IDAAL LEALIN | Collaringe C. Abdullion |
| NAME . HUDSON, LESLIE 1.2 NAME 1.3 STREET ADDRESS 8546 LEO KIDD AVE. 1.3 STREET ADDRESS | |
| CITY-ST-ZIP PORT RICHEY FL 34688 1.4 CITY-ST-ZIP | |
| TITLE D DELETE 21 TITLE | ☐ Change ☐ Addition |
| NAME HUDSON, VERCHEL L 22 NAME | |
| STREET ADDRESS 8546 LEO KIDD AVE. 2.3 STREET ADDRESS | |
| CITY-ST-ZIP PORT RICHEY FL 34668 2.4 CITY-ST-ZIP | |
| TITLE DELETE 3.1 TITLE | Change Addition |
| NAME 32 NAME | |
| STREET ADDRESS 3 3 STREET ADDRESS | |
| CITY-ST-ZIP 3 4. CITY-ST-ZIP TITLE □ DELETE 4.1 TITLE | Change Addition |
| NAME 4.2 NAME | |
| | |
| | |
| STREET ADDRESS . 4.3 STREET ADDRESS | |
| | ☐ Change ☐ Addition |
| STREET ADDRESS CITY-ST-ZIP 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | Change Addition |
| STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP TITLE □ DELETE 5.1 TITLE | ☐ Change ☐ Addition |
| STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP | |
| STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS | Change Addition |
| STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE □ DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP | |
| STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE | |

Indicated on this annual report or supplied with this niming does not qualify ton the excirption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the informatic 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.