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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000053020 (8)

THE RACHEL W. CORPORATION

FILED Apr 24 1998 8:00am Secretary of State



Principal Plac	o of Pusinoon	Mailing Address						
		_						
4250 SW 59TH AVENUE FT LAUDERDALE FL 33314		4250 SW 59TH AVENUE FT LAUDERDALE FL 33314						
FT ENDERDALE TE SOUT		TT ENODERDACE TE 00014				DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 06/16/1997		·
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number		Applied For
21		26				45-0174207		Not Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.7	5 Additional
22		27				5. Certificate of Status Desired	Fee	Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be		
23	28				Trust Fund Contribution		ed to Fees	
Zip	Country	Zιp	Cou	untry		8. This corporation owes or has paid the c		
24	25	29	30			Personal Property Tax due June 30.	Yes	√ No
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	l Agent	
	TIMER, WALTER G			81	Name			
101	11 IVES DAIRY ROAD SUITE 210	82 Street		Street Add	ress (P.O. Box Number is Not Acceptable)			
MI	AMI FL 33179					· · · · · · · · · · · · · · · · · · ·		
				B3				
				84	City		85 Z	ip Code
		10034000 51 11 00		$\perp \perp$		F		
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 Statules.								
SIGNATURE Signature, typod or printed minio of regulared agent and blord applicable (NOT: Registered Agent signature required when reinstating) DATE PAGE TOTAL PROPERTY OF THE PROPERTY OF								
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12
TITLE	DP	DELETE 11T		TLE			☐ Chang	e Addition
NAME	KATZ, RACHEL W		1.2 N	1.2 NAME]
STREET ADDRESS 302 N GREENWOOD AVENUE			1.3 STREET ADDRESS		ADDRESS			13
CITY-ST-ZIP	LEHIGH FL 33972		1.4 0	1.4 CITY-ST-ZIP				13
TITLE	DV			TLF			Chang	e 🔲 Addition
NAME	KATZ, JOSEPH E 22		2.2 N	2.2 NAME				
STREET ADDRESS	302 N GREENWOOD AVENUE		2.3 \$	2.3 STREET ADDRESS				
CITY-ST-ZIP	LEHIGH FL 33972	FUICH EL 20070		DITY - ST	T-ZIP			
TITLE	DST						Chang	e Addition
NAME	KATZ, DAN W		AME				-	
STREET ADORESS	4250 SW 59TH AVENUE		3.3 \$	TREET A	ADDRESS			
CITY-ST-ZIP	FT LAUDERDALE FL 33314		CITY - ST	T-ZIP				
TITLE	☐ DELETE 4.1 T					Chang	e 🔲 Addition	
NAME			4. 2 h	IAME				İ
STREET ADDRESS			4.3 S	TREET A	ADDRESS			
CITY-ST-ZIP			4.4 C	11Y - ST	- ZIP			İ
TITLE		DELETE	5.1 TITLE				☐ Chang	e Addition
NAME			5.2 N	AME				
STREET ADDRESS			5.3 S	TREET A	ADDRESS			
CITY-ST-ZIP				ITY-ST				
TITLE		DELETE	6.1 Ti			<u> </u>	Chang	e Addition
NAME			6.2 N				_	
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	:			ITY-ST	1			
VIII VI EU			5.5 0					

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida Statutes. I further certify that the information indicated on this arrival 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 of the receiver or trustee empowared to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 is changed, or an auttachment with an address.