

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED
Aug 13 1998 8:00am
Secretary of State

DOCUMENT # P97000056916 (4)

1. Corporation Name
RAVES IMPORT & EXPORT, INC



Principal Place of Business
**5480 INTERNATIONAL DR
ORLANDO FL 32819**

Mailing Address
**5480 INTERNATIONAL DR
ORLANDO FL 32819**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 **5472 International Dr**

Suite, Apt. #, etc.

22 City & State

23 **Orlando Florida**

Zip

24 **32819**

Country

25 **ORANGE**

2a. Mailing Address

26 **5472 International Dr**

Suite, Apt. #, etc.

27 City & State

28 **Orlando Florida**

Zip

29 **32819**

Country

30 **ORANGE**

3. Date Incorporated or Qualified

06/27/1997

4. FEI Number

59-3460716

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ **\$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

9. Name and Address of Current Registered Agent

**MELLO, ROBERTO B
5480 INTERNATIONAL DR
ORLANDO FL 32819**

10. Name and Address of New Registered Agent

81 Name

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

5472 International Dr.

83

84 City

Orlando

FL

85 Zip Code
32819

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 **PD** ☐ DELETE
NAME **MELLO, ROBERTO B**
STREET ADDRESS **5480 INTERNATIONAL DR**
CITY-ST-ZIP **ORLANDO FL 32819**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

**5472 International Dr.
Orlando FL 32819**

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

**Vice-President - Secretary
NICOLA PEDRO RUSSO
5472 International Dr
Orlando FL 32819**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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: **[Signature]**

[Signature]

8/7/98

107-523-463

CR2E034 (5/98)