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

PROFIT CORPORATION **ANNUAL REPORT**

1998

有可收收的数据的 经情况的 不可可可能 有人的现在分词 医多种性神经病 人名阿斯纳斯 医二种 医无足术 医乳蛋白素 医二氏管 医二氏病 医阴道性 医腹部丛 医耳内皮肤



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000099335 (6)

PROMELAS RESEARCH CORPORATION

FILED Apr 29 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					E HEDDIED: 110 JUSTI FOOTH BOLLE BOTH BETH BETH BETH LEVID JUICE JUST BUTH BUTH BUTH BUTH
1519 THIRD S WINTER HAVE	1519 THIRD STREET. S.E WINTER HAVEN FL 3388	* - · · - · · ·		DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified
					11/19/1997
- -	lace of Business	2a, Mailing Address			4. FEI Number Applied For
21	# -	26			59-3485825 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required
City & State		City & State 28			8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution ☐ Added to Fees
Zip			-	ntry	8. This corporation owes or has paid the current year Intangible
24	25 29 30 2 Name and Address of Current Registered Agent		[30]		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
D.1		Tiogratored Agent		81 Name	10, Hallia alla Addiess of New Neglistered Agent
RAFOOL, RAYMOND J II			ļ		
	19 THIRD STREET, S.E. NTER HAVEN FL 33880		82 Street Add		Address (P.O. Box Number is Not Acceptable)
WIF	AIEN HAVEN PL 33000		ŀ	83	
				84 City	FL 85 Zip Code
Office Of the	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was s	autoorizari	by the corn	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered agen			Agent signature r	required when reinstating) DATE
12.	OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	DATOOL BRANDON (1.1 [1]	1	Change Addition
STREET ADDRESS			1.2 NA	i i	
CITY-\$T-ZIP	WINTER HAVEN FL 33880			ieet aodress Y-ST-Zip	1
TITLE	D	DELETÉ	2.1 1(7)		Change Addition
NAME	RAFOOL, CHRISTIAN B		2.2 NAI		
STREET ADDRESS	1811 GARDEN LAKE DRIVE			EET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL 33880			Y-ST-24P	
TITLE	D	DELETE	3.1 TITI		Change Addition
NAME	RAFOOL, GORDON J		3.2 NA	AE	
STREET ADDRESS	635 FIRST STREET N		9.3 STF	EET ADDRESS	
CITY-ST-ZIP	WINTER HAVENU FL 33880		3.4. CI1	Y-S1-ZIP	
TITLE	D	DELETE	4.1 1(1)	.E	Change Addition
NAME	RA FOOL, RAYMOND J II		4. 2 NA	ME	
STREET ADDRESS	15 19 THIRD STREET, S.E.		4.3 STF	EET ADORESS	
CITY-ST-ZIP	WINTER HAVEN FL 33880		4.4 CIT	Y-S1-ZIP	
TITLE	Õ	DELETE	5.1 TITI	.E	Change Addition
NAME .	THOMPSON, SCOTT K		5.2 NA	AE	
STREET ADDRESS	2002 HELENA ROAD		5.3 STR	EET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL 33884		5.4 CIT	Y-ST-ZIP	
TITLE	D	☐ DELETE	6 1 TITU	.E	☐ Change ☐ Addition
NAME	THOMPSON, DARYL L		6.2 NA	AE	
STREET ADDRESS	2002 HELENA ROAD		6.3 STR	EET ADDRESS	
CITY-ST-ZIP	WINTER HAVEN FL 33884 640		6.4 DIT	r-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.