FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 PROFIT Jan 22 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (4)S68044 REINER RAIL, INC. Principal Place of Business Mailing Address 2641 SE 45TH ST 2641 SE 45TH ST OCALA FL 34480 OCALA FL 34480 DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualified 07/23/1991 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0274540 Not Applicable Suite, Apt, #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Ζip Country Zip 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. XYes No 25 30 24 29 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 REINER, JOSEPH 2641 SE 45TH ST Street Address (P.O. Box Number is Not Acceptable) OCALA FL 34480 83 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE NAME REINER, JOSEPH 1.2 NAME 2641 SE 45TH ST STREET ADDRESS 1.3 STREET ADDRESS OCALA FL 34480 CITY - ST - ZIP 1.4 CITY - ST-ZIP DE FIF 2.1 TITLE Change Addition REINER, BERNICE NAME 2641 SE 45TH ST STREET ADDRESS 2.3 STREET ADDRESS OCALA FL 34480 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE REINER, STEPHANIE NAME 3.2 NAME 2641 SE 45TH ST STREET ADDRESS 3.3 STREET ADORESS OCALA FL 34480 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4,1 TITLE POPKIN, PAMELA NAME 4, 2 NAME

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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY - ST-ZIP

5.1 HILE

5.2 NAME

6.1 TITLE 6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

TITLE

NAME STREET ADDRESS 2641 SE 45TH ST

OCALA FL 34480

ULIVOURF ELECEPHICEINER

DELETE

DELETE

1/12/98

352-629-1664

Change

Change

☐ Addition

Addition

E034