FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED** PROFIT FLORIDA DEPARTMENT OF STATE Jan 22 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # (1)S73042 RABAL CO., INC. Principal Place of Business Mailing Address 3201 SW 2ND AVE. 3201 SW 2ND AVE. FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/12/1991 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 217 5.W 217 S.W 65-0279230 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible USA ☐ Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAGUSA, SANTO, JR. 9668 RICHMOND CR. Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33434** 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) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition Addition 1.1 TITLE RAGUSA, SANTO, JR. NAME 1.2 NAME 9668 RICHMOND CR. STREET ADDRESS 1.3 STREET ADDRESS BOCA RATON FL CITY - ST - ZIP 1.4 CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE BALCH, WILLIAM F. 2.2 NAME NAME 3921 NW 33RD TERR. STREET ADDRESS 2.3 STREET ADDRESS LAUDERDALE LAKES FL 2. 4 CiTY-ST-ZIP CITY - ST - ZIP DELETE Addition TITLE 3.1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change \_\_\_ Addition TITLE 4,1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1), 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 of 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 the processing an attachment with an address.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DELETE

954) 764-2678 1-14-98

Change

Addition

**CR2E034**