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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

(8)

FILED May 01 1998 8:00am Secretary of State

GF	raham & G	RAHAM, INC.									
Principal	Place of Busin	Mailing Ad	iling Address					I 1 6 8 1			
LITTLE	PROFESSOR BO	DOK CENTER	6835 BIT	6835 BITTERSWEET LN.							
	V COLONIAL DR			ORLANDO FL 32819				DO NOT WRITE IN THIS SPACE			
UHLAN US	DO FL 32818		US	US				3. Date Incorporated or Qualified			
•								07/09/1992			
2. Princi	ipal Place of Bu	siness	2a. Mailing	2a. Mailing Address					4. FEI Number Applied For		
	ook Cer		├-¬ `	26					Not Applicable		
	Suite, Apt. #, etc.			Suite, Apt. #, etc.				- \$8.75 Additi	SS 75 Additional		
22 73	2 7319 W. Colonial Dr.			27				5. Certificate of Status Desired Fee Require	d		
City 8	City & State			City & State				6. Election Campaign Financing \$5.00 May Be			
	rlando	FL	28	· 				Trust Fund Contribution			
Zip_	2010	Country	Zip	Zip Count				8. This corporation owes or has paid the current year Intangib	ole		
24 3	2818	25 USA	[29]					Personal Property Tax due June 30. Yes No			
		ne and Address of Curi	ent Hegistered A	gent		B1	Name	10. Name and Address of New Registered Agent			
	GRAHAM, 1					61	маше		i		
6835 BITTERSWEET LN					(82 Street Address (P.O. Box Number is Not Acceptable)					
	ORLANDO	FL 32819				83					
						03					
					İ	84	City	FL 85 Zip Code			
44 Dure	unnt to the pro-	inions of Costions 607 F	602 and 607 1609	Elorida Statuta	n tho at		named co		intered		
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											
ager		with, and accept the ob	•					1 24 0A			
SIGNATI	URE Sleether by	of provided narries of registered	atam 1	Jardais	Bagistorer	ا ري) Adoen	taka m	m V-President 4-24-98 required when reinstalted DATE			
12.	Organis (. iy)		ND DIRECTORS	(1071)	13.	, rigici	a Bigillatan Fox	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN	12		
TITLE	PS	·		DELETE	1.1 70	ſLΕ			Addition		
NAME	GRAI	HAM, THOMAS L.			1.2 NA	ME	1		[]		
STREET ADD		BITTERSWEET LANE			1.3 ST	REETA	ADDRESS		{		
CITY-ST-ZI	P ORLA	NDO FL			1.4 CF	TY-ST	- ZIP				
TITLE	Vī			DELETE	2.1 111	ſιΕ		Change	Addition		
NAME	GRAH	IAM, MARGARET L.			2.2 NA	ME					
STREET ADD	RESS 6835	BITTERSWEET LANE			2.3 ST	REET A	ADDRESS		1		
CITY-ST-ZI	P ORLA	INDO FL			2. 4 CI	ITY-S	T · ZIP				
TITLE				DELETE	3.1 TII	ILE		Change	Addition		
NAME					3.2 NA	ME			İ		
STREET ADD	ress				3.3 ST	REET A	ADDRESS		İ		
CITY-ST-ZI	Р				3.4 CI	ITY-SI	1-2IP				
TITLE				DELETE	4.1 TII	TLE		Change	Addition		
NAME					4. 2 N	AME					
STREET ADO	RESS				43 ST	REET A	ADDRESS				
CITY-ST-ZI	Р				4.4 CI	TY-ST	- ZIP				
TITLE				☐ DELET E	5.1 TITLE			☐ Change ☐	Addition		
NAME					5.2 NA	ME					
STREET ADD	ress				5.3 ST	REE1 /	ADDRESS				
CITY-ST-ZI	Ρ				5.4 CI	1Y-ST	- ZIP				
TITLE				DEFELE	6.1 7(1	ILE		Change	Addition		
NAME					6.2 NA	ME			1		
STREET ADO	RESS				6.3 ST	REET #	ADDRESS				
CITY-ST-ZI	Р]				6.4 Cf	IY-SI	- 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.