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

PROFIT CORPORATION ANNITAL REPORT



Sandra B. Mortham

FILED

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			Apr 20 1998 8:00am Secretary of State
1. Corporation	MENT # V65753	3 (8)			
•	RICAL GOODS AND SERVICE	SES, INC.			
					A 1000 OLIKUS SILOL DIKIN DIKIN KARBI BIKAC 1883 DIGAN BIRAL BIRAK BIRAK BIRAK BIRAK BIRAK BIRAK BIRAK BIRAK
Principal Place of Business Mailing Address					
Principal Place of Business Mailing Address 7563 GLENDEVEN LANE 7563 GLENDEVEN LANE				111 p + 195	And the state of t
DELRAY BEAC		DELRAY BEACH FL 33446			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					09/22/1992
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number Applied For Not Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27			Fee Required
City & State	9	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country		8. This corporation owes or has paid the current year Intangible
24	25	29 3	0]		Personal Property Tax due June 30. Yes No
DI 4	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered Agent
BLOOM. LIAN 7563 GLENDEVEN LANE #1308 82			Stroot Ado	dress (P.O. Box Number is Not Acceptable)	
DELRAY BCH FL 33446				Stiest Add	diess (r. O. Dox Nutriber is 140t Acceptable)
			83		
ĺ			84	City	FL 85 Zip Code
11. Pursuant to office or reagent. La:	to the provisions of Sections 607.050; agistered agent, or both, in the State or familiar with, and accept the obliga	2 and 607.1508, Florida Statutes of Florida Such change was autitions of, Section 607.0505, Florida	the above thorized by da Statutes	named cor the corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE					·
12.	Signature, typed or printed name of registered age OFFICERS ANI		13.	nt signeture requ	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	BLOOM, LIAN		1.2 NAME		•
STREET ADORESS	7563 GLENDEVEN LANE DELRAY BEACH FL		1.3 STREET	ł	
CITY-ST-ZIP TITLE	DELNAT DEAUTIFL	☐ DELETE	1.4 CITY - S 2.1 TITLE	1 - 21P	☐ Change ☐ Addition
NAME			2.2 NAME		_ · -
STREET ADDRESS			2.3 STREET		
CITY-ST-ZIP TITLE		DELETE	2.4 CITY - S 3.1 TITLE	IT-ZIP	Change Addition
NAME		DECEN	3.1 HILE 3.2 NAME		C croning
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP		T prints	3.4. CITY-S	1-ZIP	
TITLE NAME		☐ DEFELE.	4.1 TITLE		Change Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET	ADDRESS	
CITY-ST-ZIP			4.4 CITY-S		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADORESS			5.3 STREET 5.4 CITY-S	- }	
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE	1-29	☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADORESS	
CITY-ST-ZIP		N. M F.B	6.4 CITY - S		Castler 110 07/0V0 Florid Octates 1 (1)

I hereby certify that the information supplied with this filling 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 of 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.

GNATURE:

| GNATURE:** SIGNATURE: