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 # 44191

(8)

DELAHANTY AND ASSOCIATES, INC.

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FILED
Mar 20 1998 8:00am
Secretary of State

Principal Place of Business Mailing Address											1 100111 81011 01001 11010 10101 11010 1011 01011 01011 01011			
1580 LE JEU					228 S OCEAN SHORES DR									
MIAMI FL 33134					KEY LARGO FL 33037									
					US						DO NOT WRITE IN THIS SPACE	<u>:</u>		
											3. Date Incorporated or Qualified 12/14/1973			
2. Principal P	lace of Busin	ness		20	. Mailing A	Address					4. FEI Number	Ar	plied For	
21				26	•						59-1502504		ot Applicable	
Suite, Apt.	#, etc.				Suite, Ap	ot. #, etc.					_ \$8	.75	Additional	
22				27							5. Certificate of Status Desired	ee Ro	equired	
City & State	е			1	City & St	ate					8. Election Campaign Financing \$	5.00	May Be	
23				28							Trust Fund Contribution A	dded	to Fees	
Zip			Country		Zip		L Co	untry	y		B. This corporation owes or has paid the current ye	ear int	angible	
24		25		29			30				Personal Property Tax due June 30. Yes] No	
			Address of Curre	nt Regis	stered Age	ent		ļ.,	1		Name and Address of New Registered Agent			
	Lahanty,							81	Na	ame				
			ean shores di	rive				82	St	reet Addre	(P.O. Box Number is Not Acceptable)			
KE	Y LARGO	FL 3	3037					Ш	<u> </u>					
								83						
								84	Ci	ity	E1 85	Zip	Code	
44 Durement	to the provie	ione	of Sections 607.05	02 and 6	N7 1508 F	Florida Statu	ites the	hove	e-na	med corpo	tion submits this statement for the purpose of chan-	aina i	s registered	
office or r	egistered ag	jent,	or both, in the State	e of Flori	da Such d	hange was	authorize	ed by	y the	corporation	tion submits this statement for the purpose of chans board of directors. I hereby accept the appointment	int as	registered	
agent. Fai	m tamiliar w	ith, a	nd accept the oblig	gations o	i, Section	607.0505, F	iorida Sta	atutes	8.					
SIGNATURE	Signature typed	Lor prin	ted name of registered ac	ent and tille	il applicable.	(NO	TE: Begister	ed Age	ent sig	nature require	nen reinstating) DATE			
12.	Olg. Bild. C. () pine		OFFICERS AN			(13.				ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTOF	RS IN 12	
TITLE	PD					DELETE	1.11	TITLE				nange	Addition	
NAME	DELAH	ANT	(HOWARD J.)				1.21	NAME						
STREET ADDRESS	228 SO	UTH	OCEAN SHORE	S DR.			1.3 5	STREET	T ADDI	RESS				
CITY-ST-ZIP	KEY LA	RGC	FL				1.40	CITY-S	ST-ZIP	,				
TITLE	VD					DELETE	2.11	TITLE			□ cı	nange	☐ Addition	
NAME]	DELAH	ANT	(LINDE M.)				2.21	NAME						
STREET ADDRESS	228 SC	UTH	OCAEN SHORE	S DR.			2.3 5	STREET	ADOI	RES\$				
CITY-ST-ZIP	KEY LA	RGC	FL				2.4	CITY-S	ST-ZH	P				
TITLE						DELETE	3.11	TITLE			□ ci	ange	Addition	
NAME							3.21	NAME						
STREET ADDRESS							3.3 9	STREET	T ADDI	RESS				
CITY-ST-ZIP							3.4.	CITY-S	ST-ZII	P				
TITLE						DELETE	4.11	TITLE				nange	Addition	
NAME							4.2	NAME						
STREET ADDRESS							4.3 \$	STREET	T ADDI	RESS				
CITY-ST-ZIP							4.4 (CITY-S	ST-ZIP	,				
TITLE						DELETE	5.11	ITLE			□ CI	ange	Addition	
NAME							5.21	NAME						
STREET ADDRESS							5.3 9	STREET	T ADDF	RESS				
CITY-ST-ZIP							5.4 0	CITY-S	ST-ZIP	,				
TITLE			<u> </u>			DELETE		TITLE			☐ CI	nange	Addition	
NAME							6.21	NAME						
								TDEET	T ADDI	neon I				

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 in attachment with an address

CICNATURE.

bullock Willelinin B

3-14-98

305-444-8201