FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortnam

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT # 3

(5)

Corporation Name

DANIELS ENTERPRISES INC.

Principal Place of Business Mailing Address											
64	OI 9TH STR		6401 9TH STREET NOF	6401 9TH STREET NORTH ST. PETERSBURG FL 33702-6623							
							3. Date Incorporated or Qualified 01/08/1967	3a. Date 03/	of Last Re 14/199		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	_		Applied For	
21			26				59-1212466			Not Applicable	
	Suite, Apt. #	ŧ, etc.	Surte, Apt. #, etc.			i	5. Certificate of Status Desired			Additional Required	
22	City & State						6. Election Campaign Financing			May Be	
23	Ony a orano	28					Trust Fund Contribution			to Fees	
	Zip	Country Zip C		Cou	ntry	8. This corporation has liability for					
24		25	29	30		l	****	□ No			
		9. Name and Address of Curre	nt Registered Agent		04 1		10. Name and Address of New F	legistered A	geni		
					81 Name						
		, THOMAS B. JR		82 Street Addr			ldress (P.O. Box Number is Not Acceptable)				
	6401 9Th				83						
	SIPEIE	RSBURG FL 33702									
					84 City			FL	85 Zı	o Code	
11	Pure ant t	a the arayisians of Sections 607 050	2 and 607.1508. Florida Statu	tes, the abo	ve nan ed	corporati	on submits this statement for the pu	rnose of cha	nging its r	egistered office	
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 agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									agent. I am		
		n, and accept the obligations of, Sec	nori 607,000, rionua Statute	5.							
Si	GNATURE _	Signature, typed or printed name of registerest ages	dia ditto dappleace to the	Hi Head door	Apetsymbe	se sa pulcati w	land removal uting	DATE		.,	
12		OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICFRS AND	DIRECTO		
TIT	LE	хЯх	☐ DELETE	ויו Т	ITUE	DIF	RECTOR	X.	X Change	■ Addition	
NAI	VE	DUQUETTE, PAMELA		12 N	AME						
STE	REET ADDRESS	6401 9TH ST NORTH		: 13S	REFT ADDRES	S					
CH	Y·ST·ZIP	ST PETE FL			ITY-SI-ZIP				7 Channa	Addition	
וווד	LF	ST	DELETE	2 1 1				L] Change	Addition	
N.Al		DANIELS, MICHAEL D		22 N							
Sti	HELT ADDRESS	6401 9TH ST N			FREE LADORES	S					
	Y-ST-ZIP	ST PETERSBURG FL	☐ DELETE		ITY - ST ZP				Change	Addition	
TIT		DANIEL C THOMAS B ID		3 1)		PRE	ESIDENT/DIRECTOR	A.	X change		
NA		DANIELS, THOMAS B JR 6401 9TH ST N		32 N	AMI STREET ADDRES	ec .					
	REET ADORESS	ST PETERSBURG FL			ITY - ST - ZIP	3.3					
THE	Y-ST-ZIP	D	DELETE	4 1 1				<u> </u>	Change	Addition	
NA.		DANIELS, ROBERT L	<u>_</u>	42 N		İ		_		_	
1	REET ADDRESS	6401 9TH ST N			TREET ADDRES	ss					
	Y · ST · Z.P	ST PETERSBURG FL			TY-ST ZIP					İ	
TIT			☐ DELETE	5.1		1			Change	Addition	
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CII	TY - \$T - ZiP			540	11 Y - ST - 21P						
	LE		☐ DEFELE	6 1	TITLE				Change	Addition	
N.A	.ME			621	AME						
ST	REET ADDRESS			635	TREET ADDRÉS	ss					

City-St-ZiP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 cory orbition or the eccayor 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 changes, from an attachment with an artifess.

SIGNATURE:

HIGH AND TYPES ON BRANTI EXPESS FIGURE OFFICE PRESS DENT

3/11/96

Date

(813)525-1564

Daytic e Phone #

CR2E034 (12/95)