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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 373092

1. Corporation Name

DALIEDIO CARADIA-DARAA INC

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90176 045 ***150.00

DAUEN	o Caiviptathaivia, inc.								
Principal Place	e of Business	Mailing Address				1 (\$4(45) (1))) (5555 (1))) 6575 (61)	Sti fram aven		
		4601 JOHN YOUNG PAF ORLANDO FL 32804	RKWAY			DO NOT WOITE IN THIS	CDACE		
						DO NOT WRITE IN THIS	SPACE		1
						3. Date Incorporated or Qualifed 11/19/1970			
2. Principal Place of Business		2a. Mailing Address				4. FEI Number		oplied For_	
21		26				59-1306095		ot Applicable	1
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	Certificate of Status Desired S8.75 Additional Fee Required			
City & State		City & State				6. Election Campaign Financing		May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Col	untry		8. This corporation owes the current year Int		_	}
24	25	29	30			Personal Property Tax.	Yes	□No	ļ
	9. Name and Address of Curren	t Registered Agent		1		10. Name and Address of New Registered	Agent		1
DOM	IN D O DANIED		`	81	Name				
	IALD C BAUER		-	82	Street Addre	ess (P.O. Box Number is Not Acceptable)			1
4601 JOHN YOUNG PARKWAY									1
ORL	ando fl			83					
				84	City		85 Zip	Code	1
	·				•	FL	.]]		
office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligations of the obligations of the control	of Florida, Such change was	s authorize	id by II	-named corpo he corporation	ration submits this statement for the purpose of n's board of directors. I hereby accept the appoi	changing its ntment as re	s registered egistered	
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (No	OTE: Registere	ed Agent	signature required	when reinstating) DATE] ;
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN			
TITLE	D	☐ DELETE	1.1 T	TITLE			Change	☐ Addition	:
NAME	BAUER,DONALD C		1.2 N	VAME					;
STREET ADDRESS	4601 JOHN YOUNG PKWY.		1.3 5	STREET #	ADDRESS				
CITY-ST-ZIP	ORLANDO FL		1.4 0	CITY-ST-	ZIP				}
TITLE	VD	☐ DELETE	2.1 T	TITLE			Change	☐ Addition	۱ ٔ
NAME	BAUER,JO CAROL	AUER,JO CAROL - 221		NAME					
STREET ADDRESS	4601 JOHN YOUNG PKWY.		2.3 5	TREET /	ADDRESS				-
CITY-ST-ZIP	ORLANDO FL		2.4	CITY-ST	-ZIP				1
TITLE	D	☐ DELETE	3.1 T	TITLE			Change	Addition	
NAME	BAUER,DONALD C		3.2 /	NAME					
STREET ADDRESS	4601 JOHN YOUNG PKWY.		3.3 9	STREET A	ADDRESS				
CITY-ST-ZIP	ORLANDO FL		3.4,	CITY-ST	-ZIP				1
TITLE		☐ DELETE	4.1 7	TITLE			Change	Addition	
NAME									
STREET ADDRESS	T .		4.21	NAME	İ				
CITY-ST-ZIP					ADDRESS				
	-		4.3 S						
TITLE		DELETE	4.3 S 4.4 C	STREET			Change	Addition	
TITLE NAME		DELETE	4.3 S 4.4 C 5.1 T	STREET A			☐ Change	Addition	
		☐ DELETE	4.3 5 4.4 C 5.1 T 5.2 N	STREET A CITY-ST- TITLE NAME			☐ Change	Addition	
NAME		☐ DELETE	4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C	STREET A CITY-ST- TITLE NAME STREET A	ADDRESS				
NAME STREET ADDRESS		☐ DELETE ☐ DELETE	4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C	STREET A CITY-ST- TITLE NAME STREET A	ADDRESS		☐ Change	Addition	
NAME STREET ADDRESS CITY-ST-ZIP			4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T	STREET A CITY-ST- TITLE NAME STREET A	ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP			4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N	STREET / CITY-ST- TITLE NAME STREET / CITY-ST- TITLE NAME	ADDRESS				

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, with all other like empowered.

SIGNATURE: