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Apr 21 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 415935 (6)  
1. Corporation Name  
DADELAND AUTHORIZED SERVICE INC



DO NOT WRITE IN THIS SPACE

Principal Place of Business 13985 SOUTH DIXIE HWY MIAMI FL 33176  
Mailing Address 13985 SOUTH DIXIE HWY MIAMI FL 33176

3. Date Incorporated or Qualified  
01/02/1973

2. Principal Place of Business 21, 22, 23, 24  
2a. Mailing Address 26, 27, 28, 29, 30

4. FEI Number 59-1429888  
5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing \$5.00 May Be Added to Fees  
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. [X] Yes [ ] No

9. Name and Address of Current Registered Agent  
NUNEZ, JACK  
13985 SOUTH DIXIE HWY  
MIAMI FL 33176

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Table with 5 rows for Officers and Directors (12). Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and a DELETE checkbox.

Table with 5 rows for Additions/Changes to Officers and Directors (13). Columns: 1.1-1.4 TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP, and checkboxes for Change/Addition.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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.

SIGNATURE: Marina C. Nunez 4/14/98 204, 224-2412

CR2E034 (10/97)