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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #

(0)

DONNAN, INC.

Secretary of State

FILED

Feb 24 1998 8:00am

Principal Place of Business 6519 COLONAL DR MARGATE FL 33063-5542 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1973 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2d. Mailing Address 2d. Mailing Address 2d. Mailing Address 2d. Mailing Address 4. FEI Number 59-1454804 Suite, Apt. #, etc. 50-1454804 Suite, Apt. #, etc.
MARGATE FL 33063-5542 US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1973 2. Principal Place of Business 2a. Mailing Address 2f. Mailing Address 2a. Mailing Address 2f. Mailing Ad
US DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/22/1973 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Suite, Apt. #, etc. Suite, Apt. #, otc. Suite, Apt. #, otc. City & State City & State City & State City & State 28 Zip Country Zip Country Country Zip Zip Country Zip Country Zip Zip Country Zip Zip Zip Zip Country Zip Zip Zip Zip Zip Zip Zip Zi
2. Principal Place of Business 3. Date Incorporated or Qualified 03/22/1973 4. FEI Number Applied For South April April April April April April April April Applied For Suite, April #, etc. 2. Suite, April #, etc. 2. Suite, April #, etc. 2. Certificate of Status Desired 3. Certificate of Status Desired 3. Suite, April #, etc. 3. Certificate of Status Desired 4. FEI Number 4. FEI Number 4. FEI Number 5. Certificate of Status Desired 6. Election Campaign Financing 7. Trust Fund Contribution 7. Added to Fees 7. Trust Fund Contribution 8. This corporation-ower or has paid the current year Intangible 7. Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 7. Country 7. Country 8. This corporation-ower or has paid the current year Intangible 9. Personal Property Tax due June 30. Yes No
2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2c. Mailing Address 2c. Mot Applied For Status Desired 2c. Mot Applied For Status Desired 2c. Mailing Address 2c.
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 22 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing Fee Required Trust Fund Contribution Added to Fees Zip Country 7:p Country 8. This corporation-ower or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
Suite, Apt. #, etc. 22 City & State City & State 28 Country
27 City & State Ci
City & State City & State 28 City & State 28 Country Country Country Country Country Country Country Country S. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent City & State 6. Election Campaign Financing Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
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24 25 29 30 Personal Property Tax due June 30. Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
DONNAN DOVOGN C 81 Name
DUNIANI, DRISON C
6319 CULUMAL DR 62 Street Address (P.O. Box Number is Not Acceptable) MARGATE FL 33063
63
84 City 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 Signature, typed or profed ranke of reported and life if applicable (NOTE fingistered Agent signature required when reinstating) DATE
12. OF LICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD DELETE 1.1 TITLE Change Addition
NAME DONNAN, BRYSON C 1.2 NAME
STREET ADDRESS 6519 COLONIAL DR 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP MARGATE FL 1.4 CITY-ST-ZIP
CITY-ST-ZIP MARGATE FL 1.4 CITY-ST-ZIP
NAME 2.2 NAME
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TITLE DELETE 6.1 TITLE Change Addition
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CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 1.4 Liberary contily that the information supplied with this filling does not qualify for the examption stated in Section 119.07(3)(i). Florida Statutes Liferary contile that the information

Thereby 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

Bryson C. Donnan, Pres.