DOCUMENT # 650073 DEFETIC SERVICES, INC. Pindpal Place of Business BODOPHN ID COLOPHN DR DOCUMENT # 650073 DEFETIC SERVICES, INC. Discretion of Business BODOPHN DR DOCUMENT B	FILE NOW: FILING FEE AFT PROFIT CORPORATION ANNUAL REPORT 1999	FLORIDA DEPARTN Katherine Secretary o DIVISION OF COM	MENT OF STATE Harris f State	FILE Feb 08, 199 Secretary	99 8:00am of State
Principal Record Business Mailing Address IGB DOPHIN DR OCEM RIDGE FL 33AS IGB DOPHIN DR OCEM RIDGE FL 33AS DO NOT WRITE IN THIS SPACE IG IGB DOPHIN DR OCEM RIDGE FL 33AS DO NOT WRITE IN THIS SPACE IGB DOPHIN DR IGB DOPHIN DR IGB DOPHIN DR OCEM RIDGE FL 33ASS IGB NOT WRITE IN THIS SPACE IGB DOPHIN DR IGB D	1. Corporation Name	· .			
2. Principal Place of Business 2a. Maling Address 4. FEI Numer Applied For Suite, Apt. R, edc. 2a Suite, Apt. R, etc. 50*1955643 Not Applicable Chy & State 50*1955643 Suite, Apt. R, etc. 5. Certificate of Status Desired Fore Required Chy & State City & State 6. Certificate of Status Desired Fore Required Z/P Country 2. Country 8. Election Campaign Financing Added to Fase Z/P Country 2. Country 8. This corporation oves the current year Immapple Added to Fase Z/P Country 2. State 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent I/P I/Did DOLPHIN DR 10	108 Dolphin Dr Ocean Ridge Fl 33435	108 DOLPHIN DR OCEAN RIDGE FL 33435		DO NOT WRITE I 3. Date Incorporated or Qualifed	· ·
Suite, Apr. F, etc.				4. FEI Number	
3 Trust Fund Contribution Added to Fees 2p Country 2p Country 8. The corporation owes the current year intangible Ivia	Suite, Apt. #, etc. 2	7		Competen Financian	Fee Required
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent WALKER, MAURO J 91 Name 108 DOLPHIN DR 92 Street Address (P.O. Box Number is Not Acceptable) 93. Term Address of Current Registered Agent 91 Name 94. Carry 92 Street Address (P.O. Box Number is Not Acceptable) 95. Carry 94 City FL 96. Carry 92 Street Address (P.O. Box Number is Not Acceptable) 97. Street Address of Correct Agent of Sections 607.0502 and 607.1500; Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida State the applicate Agent states, the above-named corporation stop adove the above-named c	Zip Country	zip	- ·	Trust Fund Contribution B. This corporation owes the current	Added to Feesyear Intangible
Torget effer agent, or both, in the State of Ploride: Such change was authorized by the corporation's board of director's. In Preby accept the appointment as registered agent, and accept the obligations of section 607/05/05, Pindia Statutes. SIGNATURE Signature, types or pinter name of registered agent, or both, in the State of Ploride: Such change was authorized by the corporation's board of director's. In Preby accept the appointment as registered agent, and accept the obligations of section 607/05/05, Pindia Statutes, SIGNATURE Signature, types or pinter name of registered agent, and the Tappicable. Interest policies The PD OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. STREET ADDRESS 108 DOLPHIN DR OEAN RIDGE FL OFFICERS DELETE STREET ADDRESS OCEAN RIDGE FL OFFICERS OCEAN RIDGE FL OCEAN RIDGE FL OCEAN RIDGE FL OCEAN OCEA	WALKER, MAURO J 108 DOLPHIN DR	gistered Agent	82 Street Addr 83		
STREET ADDRESS 100 DULPHIN DR 13 STREET ADDRESS COTY-ST-ZP OCEAN RIDGE FL 14 CTY-ST-ZP WALKER, MAURO J. 21 TITLE 21 Change STREET ADDRESS 108 DOLPHIN DR 23 STREET ADDRESS COTY-ST-ZP OCEAN RIDGE FL 24 CTY-ST-ZP OCEAN RIDGE FL 33 STREET ADDRESS STREET ADDRESS 33 STREET ADDRESS COTY-ST-ZP OCEAN RIDGE FL OCEAN RIDGE FL 33 STREET ADDRESS STREET ADDRESS 33 STREET ADDRESS COTY-ST-ZP OCEAN RIDGE FL OCEAN RIDGE FL 34 CTY-ST-ZP OCEAN RIDGE FL 34 CTY-ST-ZP OCEAN RIDGE FL 34 CTY-ST-ZP TITLE 34 CTY-ST-ZP TITLE 34 CTY-ST-ZP TITLE 35 STREET ADDRESS CTY-ST-ZP 33 STREET ADDRESS STREET ADDRESS 35 STREET ADDRESS CTY-ST-ZP 35 STREET ADDRESS STREET ADDRESS 35 STREET ADDRESS CTY-ST-ZP	öffice ör registered agent, or both, in the State of FI agent. I am familiar with, and accept the obligations SIGNATURE Signature, typed or printed name of registered agent and	orida: Such change was auth of, Section 607.0505, Florida title if applicable. (NOTE: Re	orized by the corporation Statutes. gistered Agent signature required	n's board of directors. I hereby accept th	
Implementation VSI Implementation Implementation </td <td>TITLE PD WALKER, JULIA STREET ADÓRESS 108 DOLPHIN DR OCEAN PIDOE EL</td> <td></td> <td>1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS</td> <td></td> <td>Change Addition</td>	TITLE PD WALKER, JULIA STREET ADÓRESS 108 DOLPHIN DR OCEAN PIDOE EL		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS		Change Addition
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64 CITY-ST-ZIP 64 CITY-ST-ZIP 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	NAME STREET ADDRESS CITY-ST-ZIP		6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		