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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 698052

(8)

DAN MOORE INVESTMENTS, INC.

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Principal Place of Business					Mailing Address						1	160150 BILIN 18181 1814 WAIN MILLS 118	. 41411 41411	· Aibii aibii Sibii (	Tidit (Be)
4026 HENDERSON BLVD TAMPA FL 33629					4026 HENDERSON BLVD TAMPA FL 33629-4940										
												<ol> <li>Date Incorporated or Qualified 08/07/1981</li> </ol>		Date of Last R 5/01/1996	leport
2. Principal Place of Business					2a. Ma	ailing Addres	SS					4. FEI Number		Ap	oplied For
21				2							$\bot$	59-2664268			ot Applicable
kn	Suite, Apt. #, etc.				Suite, Apt. #, etc.							5. Certificate of Status Desired			Additional
City & State			·	2		y & State	<del></del>					A Florida Consider Florida			equired
23	City & State				28							6. Election Campaign Financing Trust Fund Contribution	П	Added t	May Be
Zip Country									Country			8. This corporation has liability for			
24	25			2	29 30			30	,			Florida Statutes Yes No			
	9. Name and Address of Curre										1	IO. Name and Address of New R	egistered	d Agent	
MOO	PRE, DANIEL	L F.							81	Name					
4026 HENDERSON BLVD								-	<b>B</b> 2	Street Add	iress	(P.O. Box Number is Not Accepta	ble)		
TAMPA FL 33629					83				00						
									83						
									64	City			FI	<b>65</b> Zip i	Code
11. Pursuant office or r agent Ta	to the provisi egistered age m familiar wit	ons of Se ent, or bo th, and ar	ctions 607.0 th, in the Sta ocept the obl	502 and ite of Fi ligation	d 607.1 lorida. \$ s of, Se	1508, Florida Such change ection 607.05	Statutes was au 505, Flor	s, the ab Ithorized ida Statu	ove by ites	Inamed cor the corpora	pora ation'	tion submits this statement for the s board of directors. I hereby acce	purpose pt the ap	of changing it opointment as	s registered registered
SIGNATURE			vr			· · · · · · · · · · · · · · · · · · ·							·		
12.	Signarive typed or printed name of registered as OFFICERS AN								Ager	nt signature requ	W Denic	tion reinstating) ADDITIONS/CHANGES TO OFFI	DATE	ND DIRECTOR	20 IN 12
TIPLE	DP	OI FIGURE AND				☐ DELE	TE	1.1 717	E	·····		ADDITIONOS OF ANTIQUES TO OFFI	OLINO AI	Change	Addition
NAME	MOORE, [	DANIEL !	F			<del>,</del>		12 NA		}		•			
STREET ADDRESS	4026 HENDERSON BLVD				. 1:				1.3 STREET ADDRESS						j
CITY-S1-7IP	TAMPA, FI	LORIDA	00000		147			14011	14 CITY+ST-ZIP						
THE								21 TIT	E	·····				Change	Addition
NAME					22 NA	ME									
STREET ADDRESS								2.3 ST	REET	ADDRESS					ì
CHY-ST-Zift		17F1 177B (BANKA 2)						2. 4 CI	Y - S	T-ZIP					
THLE						☐ DELE	TE	3.1 TiT	ŧ					Change	☐ Addition
NAME								3.2 NAI	VΕ						
STHELT ACCORESS								3.3 STF	EET,	ADDRESS					
CHY-ST-ZIP								3.4. Cf		1-2IP					
TITLE						DELE	it.	4.1 111						Change	Addition
NAME								4. 2 NA							
STREET ADDRESS								4.3 STF	EET /	ADDRESS					
CHY-SI-ZIP								4.4 CIT		T-ZIP					
TILLE						DELE	:It	5.1 TIT						☐ Change	Addition
NAME								5.2 NA							İ
STREET ADDRESS										ADDRESS					
CITY - ST - ZIF								5.4 CIT	Y-ST	I-ZIP					Į

14. I do 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 18 if changed, of on an attachment with an address.

63 STREET ADDRESS 64 City-St-Zip

6.1 TITLE 6.2 NAME

DELETE

SIGNATURE:

THE

NAME STREET ADDRESS

AME OF BIGHING OFFICER OR DIRECTOR

8/3-989-4200 Dayline Phone \*

Addition

**FILED** 

May 14 1997 8:00am

Secretary of State