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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

DAN ODELICO DEALTY INC

UAN FI	NEUSS NEALLT, INC.					
Principal Plac	e of Business	Mailing Address			- COMPAND MAN DIDIA SIDIR DIDIN DOME DIRECTION D	RADA ERBIT OTOTA ODDET OTOTA ROOT
936 US #1		936 US #1				
SEBASTIAN FL 32958		SEBASTIAN FL 32958				
				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
6 Date 1 - 1 D	V				08/28/1981	<del></del>
2. Principal Place of Business		2e. Mailing Address		4. FEI Number	Applied For	
Suite Ant # etc		26 Suite Apt # ato	****		59-2125158	Not Applicable
Suite, Apt. #, etc.		Suito, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			5 Station Compains Figure 1	
23		28			<b>6.</b> Election Campaign Financing  Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country Zip		Country		8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	Yes No .
<del></del>	<del></del>	9. Name and Address of Current Registered Agent			10. Name and Address of New Registers	
PR	EU\$S, DANIEL I		81	Name		
	3 U.S. HWY. 1		82	Ctroot Addr	ess (P.O. Box Number is Not Acceptable)	
SEBASTIAN FL 32958			62	Street Addit	ess (F.O. Box Number is Not Acceptable)	
			83			
			84	City	F	85 Zip Code
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Staum familiar with, and accept the obline familiar with.	ite of Florida. Such change was a	authorized by	the corporati	oration submits this statement for the purpose ion's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE	Signature, typod or printed name of regulared a	iger Land life if applicable (NOT	Registered Agen	l signature require	ed when reinstating) DATE	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PTD	☐ DELETE	1.1 TITLE			Change Addition
NAME	PREUSS, DANIEL I		12 NAME			
STREET ADDRESS	<b>936</b> US HWY. 1		1.3 STREET A	ADDRESS		
CITY-ST-ZIP	SEBASTIAN FL 32958		1.4 CITY-ST-ZIP			
TITLE	80	☐ DELETE	2.1 TITLE	1		☐ Change ☐ Addition
NAME	PREUSS, JOAN M		2.2 NAME			
STREET ADDRESS			23 STREET A	ADDRESS		
CITY-ST-ZIP	SEBASTIAN FL 32958		2.4 CITY - \$1	r-ZIP		
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET A	ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP		L per pre	4.4 CITY - ST - ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET A			
CITY-ST-ZIP		T berete	5.4 CITY-ST	- ZIP		
TITLE		DELETÉ	61 TITLE			Change Addition
NAME			62 NAME			
STREET ADDRESS			6.3 STREET A	iddress		
				7:0		

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 composition 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 it changes or on an attachment with an address.

**FILED** 

May 04 1998 8:00am

Secretary of State