

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 12:50

DOCUMENT # F80665

(5)

1. Corporation Name

DESTIN TRADING CORPORATION

Principal Place of Business

BEACH HIGHLANDS
P O BOX 1266
SANTA ROSA BCH FL 32459

Mailing Address

BEACH HIGHLANDS
P O BOX 1266
SANTA ROSA BCH FL 32459

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
05/10/1982

3a. Date of Last Report
03/29/1994

4. FEI Number
59-2204357

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21. C/O WALTER E. BLESSEY, JR

2a. Mailing Address

26. P.O. BOX 23212

Suite, Apt., #, etc.

22. P.O. BOX 23212

Suite, Apt., #, etc.

City & State

23. HARAHAH, LA. 70183

City & State

28. HARAHAH, LA.

Zip

24. Country

Zip

29. 70183

Country

30. Country

9. Name and Address of Current Registered Agent

BLESSEY, WALTER E., JR
BEACH HIGHLANDS
SANTA ROSA BEACH FL 32459

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

(Signature of person or persons authorized to sign and file of application)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PT
NAME	BLESSEY, WALTER E., JR
STREET ADDRESS	BEACH HIGHLANDS
CITY, ST, ZIP	SANTA ROSA BEACH FL
TITLE	D
NAME	BLESSEY, WALTER E., JR
STREET ADDRESS	BEACH HIGHLANDS
CITY, ST, ZIP	SANTA ROSA BEACH FL
TITLE	S
NAME	ROGERS, GINA
STREET ADDRESS	1525 RIVER OAKS RD. E. #H
CITY, ST, ZIP	HAVAHAH LA
TITLE	V
NAME	PONTHIER, JEFF
STREET ADDRESS	1525 RIVER OAKS RD E #11
CITY, ST, ZIP	HARAHAH LA
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY, ST, ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY, ST, ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY, ST, ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY, ST, ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY, ST, ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(6)(b), Florida Statutes. I further certify that the information included 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 187, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report as an officer or director.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

EXPIRATION DATE