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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 1. Corporation Name

(5)

DESTIN TRADING CORPORATION											
Principal Place	of Business	М.	ailing Address)	### #### #############################	1 PIGII Q(BI 18 9)	
PO BOX 23		PO BOX 23212 HARAHAN LA 70183									
HARAHAN I US	LA /UI83		US				3. Date Incorporated or Qualified 05/10/1982		of Last R 2/14/19		
2. Principal Pl	lace of Business	2a.	Mailing Address				4. FEI Number 59-2204357		<u> </u>	Applied For Not Applicable	
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	e		City & State				6. Election Campaign Financing	<u></u>	\$5.0	0 May Be	
23 Zin		28					Trust Fund Contribution			d to Fees	
Zip 24	Country 25	29	Zip	30 COL	intry		8. This corporation has liability for Florida Statutes Yes	ntangible ti X No	ax under s	199.032,	
	9. Name and Address of Currer		tered Agent		T		10. Name and Address of New R		Agent		
					81	Name					
BLESSEY, WALTER E., JR BEACH HIGHLANDS					62	Street Addr	ddress (P.O. Box Number is Not Acceptable)				
	ROSA BEACH FL 32459				83		(4)				
					84	City		FL	85 Zı	p Code	
or register	to the provisions of Sections 607.0502 red agent, or both, in the State of Flori ith, and accept the obligations of, Sect	da. Such	richange was authoriz	red by the i	ove r corpi	iamed corpor oration's boar	ation submits this statement for the pured of directors. Thereby accept the appe	pose of charitment as	anging its r registered	egistered offici Lagent, Lam	
SIGNATURE	Signature: typed or proded non-clot registerial agest	and Reent.	nint dec de)" E. Broadferer	LAger	t Suredine regime	d wrear renotating)	DATE			
12.	OFFICERS AN		What was a to the property	13.			ADDITIONS/CHANGES TO OFF		DIRECTO	DRS IN 12	
TITLE	PT		DELETE	1 1 1	ILE			ĺ	Change	☐ Addition	
NAME	BLESSEY, WALTER E., JR			12 N	ΑME						
STREET ADDRESS	BEACH HIGHLANDS			. 135	TREET	ACORESS					
CITY-ST-ZIP	SANTA ROSA BEACH FL		et or re		ITY - S	T - ZIP					
TITLE	D DI ECCEV WALTED E ID		DELETE	2 11				ı	Change	☐ Addition	
NAME CARSON ARRESTS	BLESSEY, WALTER E., JR BEACH HIGHLANDS			22 N		ADDDLLC					
STREET ADDRESS	SANTA ROSA BEACH FL					ADDRESS					
CITY - ST - ZIP TITLE	S		DELETE	3 1 7	11 Y - S 11 LE	1-ZIP			Change	Addition	
NAME	ROGERS, GINA			32 N				'	,		
STREET ADDRESS	1525 RIVER OAKS RD. E. #	Н				ADDRESS					
CITY-ST-ZIP	HAVAHAN LA					1 - 7)P					
TITLE	V		DELETE	4 1 7				- · · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME	PONTHIER, JEFF			42N	AMÉ						
STREET ADDRESS	1525 RIVER OAKS RD E #H	1		438	'Bá£ľ	ADORESS					
CITY-ST-ZIP	HARAHAN LA			440	HY-S	1-2IP					
TITLE			DELETE	5 1 7	ITLE			1	Change	ncitibbA 🔲	
NAME				52N	AME						
STREET ADDRESS				53S	IHEHI	ADOPESS					
CITY - ST - ZIP	<u> </u>				1Y - S	I - Z16					
TITLE			☐ DELETE	6 1 7					Change	☐ Addition	
NAME				621	AMr						
STREET ADDRESS				1		ADDRESS					

14. Ido hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE AT DIRECTOR

Take

Displace Priority