SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F93000000651 (0)

F.D.E., INC.

CITY-ST-ZIP

FILED Aug 12 1998 8:00am Secretary of State

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										<u> </u>		
Principal Place of Business Mailing Address									- * **********************************	L BBINY BBYIN BYINI BILBY ILDL (ABL		
4805 VALDINE AVENUE COCOA FL 32926				4806 VALDINE AVENUE COCOA FL 32926					DO NOT WRITE IN TH	IS SPACE		
									3. Date Incorporated or Qualified	- I		
									01/26/1993			
2. Princip	al Place of Busin	iess	2a.	2a. Mailing Address					4. FEI Number	Applied For		
21				26					16-1404059	Not Applicable		
Suite, Apt. #, etc.				Sulte, Apt. #, etc.					5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			28	City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip		Country 25		Zip				8. This corporation owes or has paid				
24 25 29 30 30 30 30 30 30							Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
ELLSWORTH, PATRICIA M								81 Name				
4805 VALDINE AVE						82	Street /	Addres	ess (P.O. Box Number is Not Acceptable)			
COCOA FL 32926						83						
						84	City		FI	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												
40	Signalure, typed	or printed name of registered ag				ed A	gent signatur	re require	ed when reinstating) DATE			
12.	DC	OFFICERS AND DIREC							ADDITIONS/CHANGES TO OFFICERS A			
NAME	ELLSWORTH, PATRICIA N		C PELLIE							Change Addition		
STREET ADDRESS 4805 VALDINE AVENUE				1.2 NAME 1.3 STREET ADDRE			1000500					
CITY-ST-ZIP	COCOA F											
TITLE	VI	F 05950		DELETE	1.4 CF 2.1 TIT		-217					
NAME	1	TH, FLOYD		☐ DECE IE	2.2 NA				•	Change Addition		
STREET ADDR		DINE AVENUE					ADDRESS					
CITY-ST-ZIP COGOA FL 32926				2.4 CITY								
TITLE		L 02020		DELETE	3.1 Tr		2.07			Change Addition		
NAME					3.2 NA					Change Auguoff		
STREET ADDRI	ESS				1		ADDRESS					
CITY-ST-ZIP	1				3.4 CI1	Y-ST-	ZIP		•			
TITLE				DELETE	4.1 TIT					Addition		
NAME				4.2 NAM			ME					
STREET ADDRESS				4.3 STREET ADDRESS			ADDRESS		•	418112		
CITY-ST-ZIP					4.4 CIT		- 1					
TITLE				DELETE	5.1 TIT	LE.				Change Addition		
NAME					5.2 NA	ME	ļ					
STREET ADOR	ESS				5.3 ST	EET/	ADDRESS					
CITY-ST-ZIP					5.4 CIT	Y-ST-	ZIP			_		
TITLE				DELETE	6.1 TIT	LE				Change Addition		
NAME					6.2 NAME				70000261679で - ^~~~ -08/14/9801005047			
STREET ADDRESS							STREET ADDRESS					

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 corporation or the receiver or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address PATRICIA M. ELLS WORTH

6.4 CITY-ST-ZIP

ICHATURE PLANTING OF CHILD

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***150.00

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July 21, 1998

Division of Corporations Annual Reports Section P.O. Box 1500 Tallahassee, FL 32302-1500

To Whom It May Concern:

Please find enclosed our company's check for \$150.00 to cover the annual corporation fee for 1998.

The reason for this late filing is that we did not receive the original report. This is the first report that we received to complete and it is marked "SECOND NOTICE". We respectfully request that the penalty be waived since the original report was not received by us.

Thank you for your consideration in this matter.

F.D.E., Inc.