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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

	999 DIVISION OF CORPORATIONS		TIONS	02-21-1999 90050 014 ***150.00					
r. Corporation	MENT # <b>F9</b> DODWORK, INC.	3973		~					mudu 81814 488
D. in the LDIn	- 4 D - 1		Mailing Address			1		(all bibli gibli	Biblic Brass (Bi
Principal Place			472 HOLLAND ST						
1472 HOLLAND MELBOURNE FI			172 HULLAND 51 IELBOURNE FL 32935						
	_	<del></del> -					RITE IN THIS	SPACE	
						3. Date Incorporated or Qualify 08/10/1982	30		
2 Principal P	lace of Business		a. Mailing Address			4. FEI Number		TIA	pplied For
21 9/1	A / " •	RU. 26	1472 6	FOLLA	NU 57	59-2259509		<b>-</b>	ot Applicabl
Suite, Apt.	#, etc.	27	Suite, Apt. #, etc.		<del></del>	5. Certifcate of Status Desired		\$8.75	Additional lequired
City & State		EUBRD 28	City & State	FL.		Election Campaign Financir Trust Fund Contribution	ig 🗆		May Be to Fees
Zip 24 329	Country		Zip 32935	Counti	y 2.eugai).	This corporation owes the c Personal Property Tax.	urrent year Int	angible □ Yes	□No
	9. Name and Addres		istered Agent			10. Name and Address of Nev	w Registered	Agent	
IOD	CE EDEDOV M			8	1 Name				
JORGE, FREDDY M 1472 HOLLAND ST					2 Street Add	ress (P.O. Box Number is Not Acce	ptable)		
MELBOURNE FL 32935					3		<del></del>		
	<del> </del>								
				8	4 City		FL	85   Zip	Code
office or r	to the provisions of Secti egistered agent, or both, m familiar with, and acce	in the State of Flor	rida. Such change was	authorized b	y the corporati	poration submits this statement for to on's board of directors. I hereby acc	ne purpose of cept the appoi	changing its	s registered egistered
SIGNATURE						ed when reinstating)	DATE		
12.	Signature, typed or printed name	FICERS AND DIR		13.	ent signature require	ADDITIONS/CHANGES TO		D DIRECT	ORS IN 12
TITLE	DS		☐ DELETE			<del></del>		Change	<u> </u>
NAME	JORGE, ELSIE				:				
STREET ADDRESS	1472 HOLLAND ST			1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	MELBOURNE, FL 00000		F act cre	1.4 CITY-				Change	_ <sub>C</sub>
TITLE		OP DELETE		2.1 TITLE				□ Cilarige	L
NAME STREET ADDRESS	JORGE, FREDDY M 1472 HOLLAND ST			2.2 NAME	ET ADDRESS				
CITY-ST-ZIP	MELBOURNE, FL 00000		2.4 CITY						
TITLE	DVP	<u> </u>	☐ DELET€	3.1 TITLE				Change	
NAME	JORGE, MICHAEL			3.2 NAME	:				
STREET ADDRESS	715 ANITA DRIVE			3.3 STRE	ET ADDRESS	,			
CITY-ST-ZIP	MELBOURNE FL			3.4 CITY					
TITLE			☐ DELETE	4.1 TITLE	The second second			☐ Change	L,
NAME STREET ADDRESS				4. 2 NAM	ET ADDRESS				
STREET ADDRESS CITY-ST-ZIP				4.4 CITY-					
TITLE		· <u>-</u>	☐ DELETE	5.1 TITLE			<del></del>	Change	<u> </u>
NAME				5.2 NAME			•		
STREET ADDRESS					ET ADDRESS	•			
CITY-ST-ZIP			□ BELETT	5.4 CITY- 6.1 TITLE				Chance	<sub>C</sub> .
TITLE	•	-	☐ DELETE	6.1 HILE	ł			☐ Change	L.,
NAME		·a.			ET 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 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 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

**FILED** 

Feb 21, 1999 8:00 am Secretary of State