8-24-98 606-297-3674

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).

SIGNATURE

PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 98 AUG 10 PH 3: ni **DOCUMENT #** F9700002573 (0) SECRETARY OF STATE TALLAHASSEE, FLORID DAJK INCORPORATION Principal Place of Business Malling Address 39 N. PEACH ST PO BOX 68 THELMA KY 41260 THELMA KY 41260 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/15/1997 2. Principal Place of Business 2a. Malling Address 4. FEL Number Applied For 21 61-1314469 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Zip Country Zip 8. This corporation owes or has paid the current year Intangible Yes INO NA 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **POWERS, JERRY** 3725 DALE ST Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33813 83 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (2/38)12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE I DELETE Change Addition HOWARD, DON NAME 1.2 NAME 300002615743----08/14/98--01004--025 39 N. PEACH ST 1.3 STREET ADDRESS STREET ADDRESS THELMA KY 41260 \*\*\*\*150.00 \*\*\*\*150.00 Change Addition CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE 2.1 TITLE DELETE HOWARD, ALENE NAME 2.2 NAME 39 N. PEACH ST 2.3 STREET ADDRESS STREET ADDRESS THELMA KY 41260 CITY-ST-ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE \_\_\_ Change | Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4 CITY-ST-ZIP TITLE 4.1 TITLE DELETE Change Addition 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-Z#F TITLE 5.1 TITLE DELETE \_\_\_ Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE \_\_\_ DELETE \_\_\_\_ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing 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 an officer or director of the corporation or the receiver or trustee empowe in Block 12 or Block 13 if changed, or on an attachment with an address.

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DAJK Incorporation 39 N. Peach St. Theima, Ky. 41260 8- 4-98

Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

To Whom It may Concern:

I called your office on August A,1998 around 3:00 PM and talked to Lisa. I explained that I had received a letter from your office stating 2<sup>nd</sup> notice for filing my annual report. To my knowledge I never received a first notice. I have checked all my files and everywhere I keep any information pertaining to the Corporation and still didn't find a first notice. Lisa explained that I should write you this letter and send a check for the original filing fee of \$150.00 and mail it to the address listed above.

I hope this letter clarifies what has happened and the \$150.00 filing fee be accepted as payment by your office.

-Sincerely,

Don Howard (President)