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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT # 1. Corporation Name

(5)

FILED Feb 11 1998 8:00am Secretary of State

DLR S	UPPLY C	OMPANY, INC.										
Principal Plac	e of Busines	SS .	Mailin	g Address					A HODINI CODE ANTA DILOT HONI DIDID IIDI AADI		ı Fibli biy	.11 6/6/1 1981
1728 E 2ND	AVE		1728	E 2ND AVE								
TAMPA FL 33605 TAMPA FL 33605									DO NOT WRITE IN	THIS SPA	CF	
US			US						3. Date Incorporated or Qualified	17110 01		
									04/26/1983			
2. Principal F	lace of Busi	ness	2a. Ma	2a. Mailing Address					4. FEI Number		A	pplied For
21			26						59-2278709			ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired] \$		Additional
22 City 8 City			City & State									equired
City & State			28						6, Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	 -	Country	Zır)	Col	untry			8. This corporation owes or has paid th	<u> </u>		
24		25	29		30				Personal Property Tax due June 30.	Y 🔀		□ No
	0, Name	and Address of Curre		d Agent	1441	Π			10. Name and Address of New Registe	ered Age	nt	
TH	EBEAU, JO	HN R				81	Name		C 14			
1308 4 AVE						82	Street	Addres	S Anusses (P.O. Box Number is Not Acceptable)			
TAMPA FL 33605						17 3			8 E 2nd Ave			
	,					83						
						84	City			IA	5 Zip	Code
								S	Ame	FLI] '	
11. Pursuant office or agent. La	to the provis registered ag am familiar w	sions of Sections 607.050 gent, or both, in the State ith, and accept the oblig	02 and 607 1 of Florida ations of, Se	I508, Florida Statu Such change was ection 607.0505, Fl	les, the a authorize orida Sta	bove d by lutes	-named the corp :	corpo poratio	ration submits this statement for the purpoints board of directors. I hereby accept the	ose of characteristics	anging i ment as	ts registered registered
SIGNATURE												
	Signature, typed	or printed name of registered ag				d Ager	nt signature	tednited		ATE		
12.	1 10-	OFFICERS AN	D DIRECTO	RS DELETE	13.			Ι	ADDITIONS/CHANGES TO OFFICERS		RECTOR Change	RS IN 12
TITLE	VDT	III I ARETTA A		☐ DECEME	1.1 7						Change	LJ AUGITON J
NAME OTOPET ADDRESS		NU, LORETTA A			1.2 N	-	ADDRESS					19
STREET ADDRESS	DUNDE	AS OLAS				ITY-ST		١ ٨.	UNEDIN			
CITY-ST-ZIP TITLE	PSD	NTL		DELETE	2.1 T		- Zir		unedia	—— <u>—</u>	Change	Addition
NAME		JOHN R.			2.2 N							
STREET ADDRESS		S OLAS					address					1
CITY-ST-ZIP	DUNED					ITY-SI						
TITLE				DELETE	3.1 Te	ITLE		D			Change	Addition
NAME					3.2 N	ame		JAC	cqualine McKenna			
STREET ADDRESS					3.3 S	TREET A	ADDRESS	130	equaline McKenna 31 Royal George Ave.			1
CITY-ST-ZIP						ITY-SI		Od	essa FL.	_		
TITLE				DELETE	411	TLE					Change	Addition
NAME					4. 2 h	IAME						
STREET ADDRESS					4.3 S	TREET A	ADDRESS					ŧ
CITY-ST-ZIP						ITY-ST	- 210					
TITLE				DELETE	5.1 7(Lj	Change	Addition
NAME	l				5.2 N							
STREET ADDRESS	•						ADDRESS					
CITY-ST-ZIP	 -			DELETE	_	ITY-ST	ZIP				Change	Addition
TITLE					6.1 Ti						unange	Addition
NAME CERCET ADDRESS					6.2 N		I DODECO					
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP		a information concline w	dels elsio filoso	doce not qualify t		IIY-SI		d in S	ection 119.07(3)(i), Florida Statutes. I furth	or cortifu	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 12 or Block 13 if changed, or on an alka-hment with an address.