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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G51944

DANCERS RENDEZVOUS, INC.

(8)

FILED Apr 07 1998 8:00am Secretary of State

Principal Place of Business		Mading Address			IDH WIQH DIGA BIBU BIBU LODI
4445 EAST BAY DRIVE		4445 EAST BAY DRIVE			
#313		#313		DO NOT WRITE IN THIS SPACE	
CLEARWATER -FL- 94024-		CLEARWATER FL 8462		3. Date Incorporated or Qualified	
}				07/29/1983	
2. Principal Pi	laco of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 FL 33764		59-2326990	Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27	·	5. Certificate of Clarics Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	7 _(p)	Country	Trust Fund Contribution	Added to Fees
24	25	heren i	30	8. This corporation owes or has paid the or Personal Property Tax due June 30.	Current year Intangible Yes No
[24]	g, Name and Address of Curren	· · · • • • • • • • • • • • • • • • • •		10. Name and Address of New Registere	
ALLGOOD, BOBBY A. 81 Name					
O/O ALLOGOD & ACCOCIATED INO				ress (P.O. Box Number is Not Acceptable)	
2515 COUNTRYSIDE BLVD; STE. E			oli cet Addi	ess (1.0. box 14threor is 14th Acceptable)	
	EARWATER FL 34623		83		,
			84 City		85 Zip Code
				F	L
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, Forida Statutes.					
SIGNATURE					
	Signature, typed or proted name of registered aga		Registered Agent signature requir		
12.	OF LICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	P DEADO IOUNIO	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	HEADS, JOHN S. 2617 BELLHURST DRIVE		1 2 NAME		
STREET ADDRESS	DUNEDIN, FL 34698		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	D DONEDIN, TE OTOS	☐ DELETE	2.1 TITLE		Change Addition
NAME	HEADS, OLIVE J.		2.2 NAME		
STREET ADDRESS	2617 BELLHURST DRIVE		2.3 STREET ADDRESS		İ
CITY-ST-ZIP	DUNEDIN, FL 34698		2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	3.4. CITY-ST-ZIP		
TITLE		LIJ DELETE	4.1 TITLE		Change [_] Addition
NAME			4. 2 NAME		l
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP TITLE		DELFTE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		L perite	5.2 NAME		E Suenge E Modition
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		}
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		[
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	partify that the information supplied w	ith this they does not qualify for	the exemption stated in	Section 119 07(3)(i) Florida Statutes I further	cortify that the information

included on this annual report or supplied with this minig does not quality for the exemption stated in Section 119.07(3)(i). Florida Statutes. I furtier certify that the information indicated on this annual report or suppliermental 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

SIGNATURE

and S. Feads

JOHN S. HEADS.

1/2/98 (813)733-4945