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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G79605

D AND K'S PRINTING CO., INC.

(3)

FILED Apr 28 1998 8:00am Secretary of State



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Principal Plac	e of Business	Mailing Address				- 1 TOBILITI BONI TODIO LEVIE BITAN DOTAN DUH BILDI BIDIR BIDIR ON	Bir Biğir Biğir (Bğ)
S519 HANLEY RD. TAMPA FL 33634		S519 HANLEY RD. TAMPA FL 33634			DO NOT WRITE IN THIS SPACE	Ξ	
						3. Date Incorporated or Qualified	
Principal D	lace of Business					01/20/1984	
	INCH DI BUSITIUSS	2a. Mailing Address				4. FEI Number	Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.				59-2406744	Not Applicable
22 City & State		27				.75 Additional Fee Required	
23		City & State				5.00 May Be	
Zip Country		28 7in	7ip Country				dded to Fees
24	25	29	30			8. This corporation owes or has paid the current yearsonal Property Tax due June 30.	
<u> </u>	9. Name and Address of Curre		[30]			Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent	
WD	IGHT, DIANA L.		E	1	Name	ID. Harris Eller I and I	
551	9 HANLEY RD.		Ē	82 Street Add		iss (P.O. Box Number is Not Acceptable)	· · ·
TAN	MPA FL 33834		6	13			
			8	14	City	— 85	Zip Code
44 Pursuant	to the provisions of Sections CO7 OF	20 and 607 4500 Florida Crat.				FL [°°]	
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							
				Agent i	signature required	d wf-en reinstating) DATE	
12.	P OFFICERS AIN	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRE	
NAME	Charles and the state of the st		1.1 7(1)			∐ Ch	nange 🔲 Addition
STREET ADDRESS	7006 TWELVE OAKS BLVD.		1.2 NAME				
CITY-ST-ZIP	TAMPA FL		1.3 STREET ADDRESS				
TITLE	ST DELETE			1.4 CITY-ST-ZIP 2.1 TITLE		Ch	nange Addition
NAME	WRIGHT, DIANA L.		2.2 NAME			_ O.	dings Hadition
STREET ADDRESS	7006 TWELVE OAKS BLVD.			23 STREET ADDRESS		·	
CITY-ST-ZIP	TAMPA FL		2. 4 CITY-ST-ZIP				
TITLE	100000000000000000000000000000000000000	DELETE	3.1 TITLE		tu tu	☐ Ch	nange Addition
NAME			3.2 NAME			- ·	
STREET ADDRESS			3.3 STREET ADDRESS		ODRESS		
CITY-ST-ZIP	3		3.4. CITY				
TITLE		DELETE 4.1				☐ Ch	nange Addition
NAME	I ,		4. 2 NAM	4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS		DRESS		
CITY-ST-ZIP	4		4.4 CITY	4.4 CITY-ST-ZIP			
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NAME			5.2 NAM	E			
STREET ADDRESS			53 STRE	et adi	DRESS		
CITY-ST-ZIP	·		5.4 CITY	S1 - Z	čIP		
TITLE		☐ DELET e	6.1 TITLE			□ Ch	ange Addition
NAME	:		6.2 NAM	Ē			
STREET ADDRESS	i.		6.3 STRE	ET ADI	DRESS		
CITY-ST-ZIP			6 4 CHTY	- ST - Z	/IP		
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nereoy ceruly 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 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 chapted, or on an attachment with an address.

DIANA L. WRIGHT