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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED Apr 25, 1999 8:00 am Secretary of State

04-25-1999 90050 003 \*\*\*150.00

## DOCUMENT # G89677

DUSTING BY DYAN, INC.

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Principal Place	e of Business	Mailing Address	<del>.</del>			- - 1 (96)(1) 0843 (81)(8 (91)(8 0)(4) (86)( (84) (	TENER OFBEL MEGIE OFBEL DE	AND EIRII AND
% A.E. WALSH 3851 N.W. 126TH AVE. #615 CORAL SPRINGS FL 33065		% A.E. WALSH 3851 N.W. 126TH AVE. #615 CORAL SPRINGS FL 33065			DO NOT WRITE IN	THIS SPACE		
OUTHE OF THE						3. Date Incorporated or Qualifed		
						03/12/1984	/ .	
-2 Principal P	lace of Business	2a. Mailing Address "				4. FEI Number	— — · · ·	plied For
21		26				59-2348610		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 A	
City & Stat	9 .	City & State				6. Election Campaign Financing	\$5.00	
23		28				Trust Fund Contribution	Added to	o Fees
Zip 24	Country 25	25 29 30				This corporation owes the current year Personal Property Tax.	☐ Yes	□No
	9. Name and Address of Curren	t Registered Agent		1		10. Name and Address of New Registe	red Agent	
O'NI	III DADEDT E		81	Nar	ne			
O'NEIL, ROBERT E. 2929 E. COMMERICAL BLVD.			82	Stre	et Addre	ess (P.O. Box Number is Not Acceptable)		
	E 800, BARNETT BANK TOWER		83	ļ				
FUK	T LAUDERDALE FL 33308		84	City			FL 85 Zip C	ode
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	Signature, typed or printed name of registered agen	it and title if applicable. (NOTE: Re	gistered Ager	nt signat	re required	when reinstating) DA1		
12.		D DIRECTORS	13			ADDITIONS/CHANGES TO OFFICER		
TITLE	PD	☐ DELETÉ	1.1 TITLE				Change	☐ Addition }
NAME	WALSH, DIANNE M.		1.2 NAME		ļ			
STREET ADDRESS	3851 NW 126TH AVE. #615	·		ADDR	:SS			9
CITY-ST-ZIP	CORAL SPRINGS FL	☐ DELETE	1.4 CITY-S 2.1 TITLE	T-ZIP	<del></del> -		Change	Addition
TITLE	STD	C) percie					oago	
NAME			2.2 NAME 2.3 STREET		.ee -		. · -	*ري،
STREET ADDRESS	CORAL SPRINGS FL				~~			
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NAME	•	<del></del>	3.2 NAME					
STREET ADDRESS	[		3.3 STREET	r addré	:ss	•		
CITY-SY-ZIP			3.4. CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE		T		☐ Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREET	T ADDRE	:SS			
CITY-ST-ZIP	·		4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE		ŀ		Change	☐ Addition
NAME			5.2 NAME					ļ
STREET ADDRESS			5.3 STREET		:SS			i
CITY-ST-ZIP	是一句。 计分类化 经收益 医牙管		5.4 CITY-S	T-ZIP				
TITLE W		☐ DELETE	6.1 TITLE				Change	Addition
NAME (%)	Fred C		6.2 NAME					
STREET ADDRESS	j -		6.3 STREET		:SS		•	
CMY-ST-ZIP			6.4 CITY-S	T-ZIP				

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 the information indicated on this artiful 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.

SIGNATURE: