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

**PROFIT** CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

DART PUB VENTURES, INC.


**FILED** 

Apr 09 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address						- I TABISHI BONE USULO NIGUL OLUBAR TIHIL GODE DIBIN ON	YII BIBII İIBII İ	INDEL DIDIN IDEE			
635 SW 28 ST GAINESVILLE FL 32607			635 SW 28 ST GAINESVILLE FL 32607								
								DO NOT WRITE IN THIS	SPACE		
								3. Date Incorporated or Qualified 03/21/1984			
2. Principal Place of Business 2e. Mailing Address								4. FÉI Number		Applied For	
21				26				59-2380639		Not Applicable	
Suite, Apt. #, etc				Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional	
22			27					9. Certificate of Status Desired	Fee	Required	
City & State				City & State				6. Election Campaign Financing Trust Fund Contribution		O May Be	
Zip	Zip Country		28	Zip Country		,			d to Fees		
24		25	29	•	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9, Name	and Address of Co		tered Agent		$\prod$		10. Name and Address of New Registered			
C	LARK, EDW	ARD L.				81	Name				
635 SW 28 ST.				82	Street Addre	ess (P.O. Box Number is Not Acceptable)					
GAINESVILLE FL 32607				-							
						83					
						84	City	F	<b>85</b> Zip	p Code	
11. Pursuan	nt to the provis	ions of Sections 607	.0502 and 6	07.1508, Florida Sta	atutes, the a	boye	e-named corp	poration submits this statement for the purpose	of changing	its registered	
office or	r registered ac	ent, or both, in the S	State of Florid	da. Such change wa L. Section 607 0505	as authorize	d by	the corporati	ion's board of directors. I hereby accept the ap	pointment a	as registered	
SIGNATURE		m, and decopit the c	anightenis o	, occion 607.0303,	, i longa ola	itutes	<b>.</b>				
		or pented name of registers			NOTE Registere	ed Age	nt signature require	ed when reinstaling. DATE			
12.	DP	OFFICERS	AND DIREC		13.			ADDITIONS/CHANGES TO OFFICERS AN	-		
TITLE NAME		EDWADO		☐ DELETE	1.1 7				Change	Addition	
NAME CLARK, EDWARD STREET ADDRESS 2106 SOUTHWEST 13TH ST				IAME	ADDRESS						
CITY-ST-ZIP	A SECONDA CONTRACTOR					IIY-S	ĺ				
TITLE				DELETE	2.1 T		1-211		Change	Addition	
NAME					2.2 N	IAME				_	
STREET ADDRESS	s ]				2.3 S	TREET	ADDRESS			1	
CITY-ST-ZIP					2.4 (	CITY-5	ST-ZIP				
TITLE	ĺ			☐ DELETE	3.1 T	ITLE			☐ Change	Addition	
NAME	. 1				3.2 N						
STREET ADDRESS	6						ADDRESS				
CITY-ST-ZIP TITLE				DELETE	3.4. C		ST-ZIP		Change	Addition	
NAME					4.21				C Onlargo	7,000,000	
STREET ADDRESS	,[						ADDRESS				
CITY-ST-ZIP	<u>L</u>					ITY-S					
TITLE			···	☐ DELETE	5.1 T	ITLE			Change	Addition	
NAME					5.2 N	AME					
STREET ADDRESS	6				5.3 S	TREET	ADDRESS				
CITY-ST-ZIP	<b></b>			T SELECT		ITY-S	T-ZIP				
TITLE				☐ DELETE	61 T				Change	Addition	
NAME Street address					62 N		ADDRECO				
	`						ADDRESS				
CITY-ST-ZIP	1				640	ITY-S	1 - ZIP				

I hereby certify that the information supplied with this filing does not qualindicated on this annual report or supplemental annual report is true and officer or director of the corporation of the receiver or truthus employers Block 12 or Block 13 if changed or or an attachment with an addless. pe exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information to and that my signature shall have the same legal effect as if made under oath; that I am an cute this retxort as required by Chapter 607, Florida Statutes; and that my name appears in -30-98 352 3730281