## 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 14, 1999 8:00 am Secretary of State

04-14-1999 90154 009 \*\*\*300.00

DOCUMENT # H00569  1. Corporation Name DEDO MANUFACTURING CORPORATION						. 1881   1881   1881   1882	/18 1614 B1814 \$1814 A1	<b>1</b> () <b>8</b> 1 <b>8</b> 11 #41	1); 8)8); 188)
on On									
Principal Place of Business Mailing Address					-		ila ibil bidil biali bi		IN CARLAGO
						·			
2401 PGA BLVD 2401 PGA BLVD STE 128 128									
PALM BCH GARDENS FL 33410 PALM BCH GARDENS FL 33410			10			DO NOT WRITE IN THIS SPACE			
US US						3. Date Incorporated or Qualifed			
						04/20/1984			
2. Principal Place of Business				ms Ro	/	4. FEI Number			lied For
				ms KO	7.	59-2413428	· ·	3.75 Ac	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 # 303-C 27 # 303-					_=_=	5. Certificate of Status Desired	U .	Fee Req	uired
23 Palm Beach Cardens & Palm Beach Gard				dens, Fi		6, Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip ZZip Country Country C						8. This corporation owes the curr			
24 334	HU 25 U.S.H.	29 3340 30	L	USA		Personal Property Tax.	\\		□No
	9. Name and Address of Current R	legistered Agent	- 04	1 Name		10. Name and Address of New I	kegistered Ager	<u> </u>	
DEDO, DOUGLAS D.									
2401 PGA BLVD				2 Street	Addres	ss (P.O. Box Number is Not Accept	able)		ì
STE 128				3					─
PALM BCH GARDENS FL 33410			L	<u> </u>					
•			84 City				FL  85	Zip Co	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 reg 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 regist agent. I am familiar with, and accept the obligations of section 607.0505, Florida Statutes.  SIGNATURE  Signature. We do or printed name of registered agent and title if applicable)  (NOTE: Registered Agent signature required when reinstating)  DATE								stered	
12.	OFFICERS AND		13.		ſ	ADDITIONS/CHANGES TO OF			RS IN 12 Addition
TITLE	P9/	☐ DELETE	1.1 TITLE				_	Change	_  ,
NAME	DÉDO, DOUGLAS D.		1.2 NAME	<u>.</u>		11 Prosperity Farms m Beach Gardens, 1	PJ #	70 Z -C	<u> </u>
STREET ADDRESS				ET ADDRESS	112	Paral Gardene	33410	)	
CITY-ST-ZIP			1.4 CITY- 2.1 TITLE		tall	m Beach Galders, 1		Change	Addition
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CITY-ST-ZIP .			3.1 TITLE					Change	Addition
NAME	<del>-</del>		3.2 NAME		}				}
STREET ADDRESS	3.		3.3 STREET ADDRESS						Ì
CITY-ST-ZIP			3.4. CITY-ST-ZIP						
TITLE		☐ DELETE	4.1 TITLE				<u> </u>	Change	☐ Addition
NAME			4, 2 NAME	E	1				
STREET ADDRESS			4.3 STREI	ET ADDRESS					1
CITY-ST-ZIP			4,4 CITY-	ST-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME	·		5.2 NAME		1	•			- 1
STREET ADORESS				ET ADDRESS					
CITY-ST-ZIP	<u></u>		5.4 CITY-		ļ				
TITLE	~		6.1 TITLE		I			Change	☐ Addition

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 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 or an attachment with an address, with all other like empowered.

6,2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-SY-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

561-774-7112