1999

DOCUMENT # LOOSES



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90023 013 ***150.00

1. Corporation DALY &	IUZUUZ	-					
Principal Place of Business Mailing Address					I (BB:0)) Bitt 08140 item idite attin iter ater a	1811 61814 81811 814))(01011 1001
% JAMES L. DA 6113 ROSE TER PLANTATON FL	% JAMES L. DALY 6113 ROSE TERRACE PLANTATON FL 33317	SE TERRACE		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
					05/09/1984		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	<u> </u>	lied For
21					59-2406286		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Ad Fee Req	
City & State	<u>a a a a a a a a a a a a a a a a a a a </u>	City & State			C Floring Compaign Financing	\$5.00 N	
23	s	28			Trust Fund Contribution	Added to	
Zip	Country	Zip	Countr	у	8. This corporation owes the current year Int	angible	
24	25	29 3	30		Personal Property Tax.		No
. '	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New Registered	Agent	_
DALY, JAMES L. 6113 ROSE TERRACE			8:	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
PLANTATION FL 33317			8:	3			
			8-	'	FL	85 Zip C	
office or re agent. I as	to the provisions of Sections do you egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered age	of Florida. Such change was autations of, Section 607.0505, Florid	inorized b da Statute	y the corporati	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint of the purpose of the	ntment as reg	istered
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	
TITLE	PTD DELETE 1.1		1.1 TITLE			☐ Change	Addition
NAME	DALY, JAMES L.		1.2 NAME	:			
STREET ADDRESS	6113 ROSE TERRACE		1.3 STRE	ET ADORESS			\
CITY-ST-ZIP			1.4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		
TITLE	VPSD □ DELETE 2.1		2.1 TITLE			☐ Change	☐ Addition
NAME	DALY, MARY JO		2.2 NAME				
STREET ADDRESS	6113 ROSE TERR			ET ADDRESS	•		
CITY-ST-ZIP	PLANTATION FL	DELETE	2.4 CITY 3.1 TITLE			☐ Change	Addition
TITLE			3.2 NAME	1			
NAME	,			ET ADDRESS			1
STREET ADDRESS			3.4. CITY				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE			Change	Addition
NAME			4. 2 NAM	E			1
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE	:		Change	☐ Addition
NAME			5.2 NĂME				Ĭ
STREET ADDRESS				ET ADDRESS			ļ
CITY-ST-ZIP		- triba	5.4 CITY-		<u> </u>		
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
MAME	İ		6.2 NAME	= [

CITY-ST-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 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 on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CTTY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS