## 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

## DOCUMENT # H98336 1. Corporation Name

D AND N RENTALS, INC.

•					_						
Principal Place	e of Business	★ Mailing Ad	dress								
2900 7TH AVEN ST. PETERSBUR		260 HILANTING WARTH  \$7. PTERSONNO EL 22713  370 53rd AVe. N. Lot 421  St. Petersburg, FL 33703-2325				DO NOT WF	RITE IN THIS	SPACE			
	* CHANGETTO:					5	3. Date Incorporated or Qualifed 02/06/1986				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		<del></del>	pplied For		
21		26					59-2669132			lot Applicable	
- Suite, Apt.	#, etc.	27				. «. 	5. Certificate of Status Desired			Additional Required	
City & State	e	City & State					6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees				
Zip 24	Country 25	Zip	36	Country	,		This corporation owes the cu     Personal Property Tax.	rrent year Int	angible Yes	<b>≫</b> No	
	9. Name and Address of Current	Registered A	gent				10. Name and Address of New	Registered	Agent	<del></del> _	
				81	Nam	1 <del>0</del>				ļ	
	ker, Willaim D 3rd av <mark>enue Nor</mark> th				Stre	et Addre	ess (P.O. Box Number is Not Acceptable)				
	E 405			83							
ST. F	PETERSBURG FL 33703			-	-				ine Zir	Code	
				84	City		•	FL	85 Zip	Code	
agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	ins of, Section	607.0505, Florida	a Statutes	i. 		when reinstating)	DATE	<del>_</del> .		
40	Signature, typed or printed name of registered agent a OFFICERS AND		<del></del>	13.	nt signatu	is radulled	ADDITIONS/CHANGES TO O	<del></del>	ID DIRECT	ORS IN 12	
TITLE	D OFFICERS AND	BIRLOTORO	☐ DELETE	1.1 TITLE		一	7.5571101103011111020 10 0		Change		
NAME	HEREOT BIOLIADO E		_	1.2 NAME			,				
STREET ADDRESS	2900-7TH AVE.N. See al	fore		1.3 STREE	T ADORE	ss					
CITY-ST-ZIP	ST.PETERSBURG FL			1.4 CITY-S		_				ľ	
TITLE	DST		DELETE	2.1 TITLE					Change	Addition	
NAME	WELCH MODELS II	4 .		2.2 NAME							
STREET ADDRESS	2900 7TH AVENUE, NORTH	ealove		2.3 STREE	T ADDRE	ss				ŀ	
CITY-ST-ZIP	ST. PETERSBURG FL			2.4 CITY-		1	· _	·			
TITLE			☐ DELETE	3.1 TITLE					Change	Addition	
NAME				3.2 NAME						1	
STREET ADDRESS				3.3 STREE	T ADDRE	ss					
CITY-ST-ZIP	·			3.4. CITY-	ST-ZIP						
TITLE			DELETE	4.1 TITLE					Change	Addition	
NAME				4. 2 NAME							
STREET ADDRESS	}			4.3 STREE	TADDRE	ss					
CITY-ST-ZIP	·			4.4 CITY- S				<u>.</u>			
TITLE			☐ DELETE	5.1 TITLE					Change	Addition	
NAME				5.2 NAME			•				
STREET ADORESS			!	5.3 STREE	T ADDRE	SS				ſ	
CITY-ST-ZIP	•			5.4 CITY-S	T-ZIP						
TITLE	,		DELETE	6.1 TITL€					Change	Addition	
NAME	J			6.2 NAME						J	
STREET ADDRESS	•		. •	6.3 STREE	T ADDRE	SS				j	

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90141 018 \*\*\*150.00

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