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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J47285

(8)

DELKRAFT INC.

## **FILED** May 14 1998 8:00am Secretary of State



Principal Place of Business Mailing Address									s tootisé out alen fable tiebt total alle bibli álét	Albit Bibit 1881			
13455 NOEL ROAD STE. 1100				13455 NOEL RD.									
DALLAS TX 75240				STE. 1100 Dallas TX 75240					DO NOT WRITE IN THIS SPACE				
US			l	JS					3. Date Incorporated or Qualified 12/16/1986				
2. Principal Place of Business				2a. Mailing Address					4. FEI Number Appl			r	
21				26					75-2147551		Not Applica	able	
Suite, Apt. #, etc.				Suite, Apt #, etc.					5. Certificate of Status Desired		5 Additional Required	.1	
City & State				City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees				
Zip	Country			Zip Cou			ntry 8. This o		8. This corporation owes or has paid the cu	rrent year	Intangible	$\neg$	
24	25			<del></del>	30			Personal Property Tax due June 30. Yes X No					
	and Address of C	urrent Regis	stered Agent		1			10. Name and Address of New Registered	Agent				
	-	TION SYSTEM				81	Name						
1200 \$. PINE ISLAND ROAD PLANTATION FL 33324							Street	Addres	s (P.O. Box Number is Not Acceptable)				
]						83				•			
						84	City		Pt	85 Z	Zip Code	=	
€ Digouoni	to the provini	oue of Sections CO	7 00 00 00 00	207 1E00 Florido Ctot	don the o				FL	-			
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.												id l	
SIGNATURE												_ [	
Signature, typed or printed name of togesteed a joint and title diapplicable. (NO  12. OF LICEBS AND DIRECTORS						Registered Agent signature require  13.			when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECT	CODE IAL 40		
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NAME	PRIEST,				3 2 N	AME		MIL	LS, ROBERT			İ	
STREET ADDRESS		DEL RD., STE. 1	100		3.3 S	TAEET	address	134	55 NOEL ROAD, SUITE 1100	)		į	
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NAME		HERBERT RWEG 33			4.21	AMÉ		BOT	TA, CHARLES R.				
STREET ADDRESS	ZURICH				1		ADDRESS		ICHERWEG 33				
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CITY-ST-ZIP	L.,,	<del> </del>			6.4 C	TY - \$	r-ZIP						

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 copied attoin 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.

ROBERT MILLS, VICE PRESIDENT (1), (100 (972) 774-4100