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

**PROFIT** CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J95204

(0)

D & M F	renovations, in	C.						. 240 (610) 21110 21671 2 <b>0</b> 711 211				
Principal Place of Business % MITCH PIATT 1223 UNION STREET CLEARWATER FL 34615			Mailing Address  MITCH PIATT 1223 UNION STREET CLEARWATER FL 34615-1150									
	. 2 0 0 0 0						3. Date Inc. 07/28/	corporated or Qualified		Date of Last R 5/01/1996	Report	
2. Principal Place of Business			2a. Mailing Address					4. FEI Number Applied For				
M Code Ant to de			Suite, Apt. #, etc.				59-21	59-2824553 Not Applicable \$8.75 Additional				
Suite, Apt. #, etc.			27				6. Certifica	ate of Status Desired		,	Additional equired	
City & State			City & State				8 Flection	Campaign Financing			May Be	
3			28					and Contribution			to Fees	
Zip Country			Zip Country				8. This co	8. This corporation has liability for intangible tax under s. 199.032,				
4 25			29 30				Florida Statutes Yes No					
	g. Name and Addre	ss of Current Re	gistered Agent		ļ		10, Name a	and Address of New R	egistere	d Agent		
	T, MITCH				81	Name						
1223 UNION ST						Street Ac	Address (P.O. Box Number is Not Acceptable)					
CLE	ARWATER FL 34615				83							
					63		:		1000		44.3	
					84	City	:		F	<b>85</b> Zip	Code	
office or re agent. I ar SIGNATURE	to the provisions of Sect egistered agent, or both in familiar with, and accompanies agencies agencians agencias agencies agencias agencies agencie	, in the State of F ept the obligation	lorida. Such change wa s of, Section 607.0505,	as authorize Florida Sta	d by tutes	the corpo	oration's board of	directors. I hereby acce	pt the ap	pointment as	registered	
12.		FICERS AND DI		13.		and degradate to		NS/CHANGES TO OFF		ND DIRECTOR	RS IN 12	
TILLE	V		DELETE	1,1 T	ITLE					Change	Addition	
NAME	HOGG, DON			1.2 N	AME		in the state of	r. PART				
STREET ADDRESS	1466 TURNER ST			1.3 S	TREET	ADORESS	1223 UNIO	N Sr	-			
City - St - 74P	CLEARWATER FL			1.4 0	ITY-S	T-ZIP	CLEARWA	TER FL 34619	) 			
TILE			☐ DELETE	2.1 T	ITLE					Change	Addition	
NAMI				2.2 N								
STREET ADOPESS						ADDRESS						
CHY-S1-ZIP TILE			DELETE	2.4 ( 3.1 T	********	ST-ZIP			<del></del>	Change	Addition	
NAME			_ otten	3.1 V						TH Average	Addition	
STREET ADDRESS						ADORESS						
CITY - S1 - ZIP						ST-ZIP						
TITLE			☐ DELETE	4.1 T		<u> </u>	***************************************	······································		Change	Addition	
NAME				4.21	AME							
STREET ADDRESS				4.3 S	TREET	ADDRESS						
CITY - S1 - ZIP				4.4 0	ITY-S	T- ZIP						
TITLE			☐ D€LETE	5.1 T	ITLE					Change	Addition	
NAME				5.2 N	AME							
STREET ADDRESS						ADDRESS						
CHTY - ST - ZiP		****	DELETE		ITY-S	T-ZIP				Change	Addition	
TILE			∐ Utitit	6.1 7				%		Change	Addition	
NAME OXOGET ADMINISTRA				62 N		ADORCOS		1.2				
STREET ADDRESS						ADDRESS		1 J.T.				
City-St-2iP 14. I do hereb	by cerlify that the informa	ition supplied wit	h this filing does not a		ITY-S		ted in Section 11	9.07(3)(i). Florida Statut	es. I furth	ner certify that	the	
information	n indicated on this annu flicer or director of the c n Block 12 or Block 3 i	al report or supplemental areas and areas are also are a	lemental annual report i receiver or trustee emp	is true and	ACCI.	irate and th	hat my signature : port as required b	shall have the same lec	al effect	as if made un	ider oath: that	