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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Şandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

STREET ADDRESS

DOCUMENT # J96805

(3)

DOSTIE DEVELOPMENT, INC.

DOGIN	E DEVELOPMENT, 1140.				
Principal Plan	ce of Business	Mailing Address		- I TREATING DATE TRIAN ELIMIN BOUND BANK	NAME NO PARTICIPATE DE LA CONTRACTOR DE LA
6824 DISTRIBUTION AVE S JACKSONVILLE FL 32256 US		6924 DISTRIBUTION AVE JACKSONVILLE FL 32256 US			
				3. Date Incorporated or Qualified 10/09/1987	3a. Date of Last Report 03/26/1996
2. Principa!	Place of Business	28. Mailing Address		4. FEI Number	Applied For
21 26		26		59-2849778	Not Applicable
——————————————————————————————————————		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27			Fee Required
City & Sta	Je			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<b>23</b>	Country	<b>28</b>	Country	This corporation has liability for in	
24	25	29	30		Yes No
	9. Name and Address of Currer			10. Name and Address of New Re	gistered Agent
DC	OSTIE, RENE J		81 Name		
	80 GULFSIDE DRIVE		82 Street Add	ress (P.O. Box Number is Not Acceptab	le)
SU	JITE #4				
JA	CKSONVILLE FL 32256		83		
			84 City		FL 85 Zip Code
<b>11.</b> Pursuan	to the provisions of Sections 607.050	2 and 607.1508. Florida Statut	es, the above-named core	poration submits this statement for the p	urpose of changing its registered
office or agent 1	registered agent for both, in the State am familiar with, and accept the oblig	of Florida. Such change was a ations of, Section 607.0505, Fk	authorized by the corporal orida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	at the appointment as registered
SIGNATURE					
12.	Signation, type dioriponted name of region red agr	errand ete if applicable (NOT DIBECTORS	F Registered Agent signature requi	red when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TUTLE	ADDITIONS/OFFIANCES TO OFFIC	Change Addition
NAME	DOSTIE, RENE JR.	_	1.2 NAME		
STREET ADDRESS	AAAA AAI EAIRE ARKE		1.3 STREET ADDRESS		
CITY-ST ZIP	JACKSONVILLE FL		1.4 CITY - ST - ZIP		Ì
TI*LE	VPD	DELETE	2.1 TITLE	**************************************	Change Addition
NAME	DOSTIE, RICHARD R.		2.2 NAME	•	
STREET ADDRESS			2.3 STREET ADDRESS		
C-TY - ST - ZIP	JACKSONVILLE FL		2. 4 CITY-ST-ZIP		
TITLE	STD	DELETE	3.1 TITLE	• • •	Change Addition
NAME	DOSTIE, DAVID O.		3.2 NAME		
STREET ADDRESS		SOUTH	3.3 STREET ADDRESS		
CITY - ST - ZIP	JACKSONVILLE FL	DELCAS	3.4. CITY-ST-ZIP		0
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
TILE		F"] fyrre it	5 1 TITLE		□ cuange □ Addition
NAME CONTRACTOR			5.2 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-SF-7i2 Title		DELETE	5 4 CITY - ST - ZIP 6 1 TITLE		Change Addition
NAME		□ Millin	62 NAME		E suando E vocation
19791575	1		O Z TWYNIL		

14. I do 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.

SIGNATURE:

(904) 262 · 3227

63 STREET ADDRESS 64 CHY-ST-ZIP