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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L79780 1. Corporation Name

D & D BATTERY INC.

Principal Place	e of Business	Mailing Address			,		
12504 STARKEY ROAD 12504 STARKEY ROAD							
LARGO FL 34643 LARGO FL 34643		LARGO FL 34643			DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed	OFAUL .	
					06/12/1990		
2 Principal P	lace of Business	2a, Mailing Address			4. FEI Number	Apr	olied For
- '	lace of Business	26. Walling Address			59-3086589	- <u>-</u> -	Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 A	
─ 1 ' '	<i>"</i> , 500.	27			5. Certificate of Status Desired	Fee Rec	quired
City & State	e	City & State			6, Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	, ,
Zip Zip	Country	Zip	Country		8. This corporation owes the current year In	tangible	
24	25		30		Personal Property Tax.		□No
24	9. Name and Address of Curren		<u>~</u>		10. Name and Address of New Registered	Agent	
			81	Name			
DIAM	JOND, IRA			Ctro - A 4	(C.O. Box Number in Not Accontable)		
12504 STARKEY ROAD			82	Street A	Address (P.O. Box Number is Not Acceptable)		· .
LAR	GO FL 33773		83	 			
			L'				
			84	City	FL	85 Zip C	ode
agent. I a SIGNATURE	am familiar with, and accept the obligation of registered age. OFFICERS AN				equired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D	☐ DELETE	1.1 TITLE		D, PRESEDENT	Change	☐ Addition]
NAME	DIAMOND, IRA P.		1.2 NAME		Diamond, Ira P.		
STREET ADDRESS	12504 STARKEY ROAD		1.3 STREE	TADDRESS	12504 Starkey Road		
CITY-ST-ZIP	LARGO FL		1.4 CITY-S	T-ZIP_			
TITLE	D	☐ DELETE	2,1 TITLE		Largo, FL. 33773	Change	☐ Addition
NAME	DUFFY, WILLIAM J.		2.2 NAME				}
STREET ADDRESS	10EGA OTADICEV DOAD		2.3 STREET	TADDRESS			}
CITY-ST-ZIP	LARGO-FL		2. 4 CITY-S	ļ	الأسيدي سيهلان المناسب		
TITLE		☐ DELETE	3 1 TITLE		D, Vice Presedent	Change	Addition
NAME			3.2 NAME		Lindal (Rudy) Crawfor		1
STREET ADDRESS			3.3 STREET	T 4DDDEGG	12504 Starkey Road	$\alpha_{\gamma_{m}}$	
CITY-ST-ZIP				ADDRESS	LEGOT DESTREY ROSE	`	
TITLE				!	Largo Ft. 33773	*	
NAME		[] DELETE	3.4. CITY-S	!	<u>Largo, FL. 33773</u>	Change	X Addition
STREET ADDRESS	1	☐ DELETE	3.4. CITY-S	!	Largo, FL. 33773 D, Treasurer	¹] Change	X Addition
CITY-ST-ZIP		C] DELETE	3.4, CITY-S 4.1 TITLE 4, 2 NAME	ST-ZIP	Largo, FL. 33773 D, Treasurer Ray Glass	'] Change	⊠ Addition
UIII-DI-AIC		[] DELETE	3.4. CITY-S 4.1 TITLE 4. 2 NAME 4.3 STREET	ST-ZIP T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road	¹ ☐ Change	⊠ Addition
TITLE			3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ST-ZIP T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass	¹	Addition
TITLE		☐ DELETE	3.4. CITY-S 4.1 TITLE 4. 2 NAME 4.3 STREET	ST-ZIP T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road Largo, FL. 33773		· .
NAME			3.4. C/TY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 C/TY-S 5.1 TITLE 5.2 NAME	ST-ZIP T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road		· .
NAME STREET ADDRESS			3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	T ADDRESS T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road Largo, FL. 33773		· .
NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	3.4. C/TY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 C/TY-S 5.1 TITLE 5.2 NAME	T ADDRESS T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road Largo, FL. 33773	☐ Change	· .
NAME STREET ADDRESS			3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	T ADDRESS T ADDRESS	Largo, FL. 33773 D, Treasurer Ray Glass 12504 Starkey Road Largo, FL. 33773		. Addition

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 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS