SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L9908

1. Corporation Name

D. DANIELO CONTROLLE INC.

(8)

D BANKS CONSTRUCTION INC.

Mailing Address

FILED Aug 04 1997 8:00am Secretary of State



4412 WALTHAM AVE 4412 WALTHAM AVE TAMPA FL 33634-7346 TAMPA FL 33634-7346 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 07/26/1990 06/19/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 9105 59-3052309 26 Tubor Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8,75 Additional 5. Certificate of Status Desired 20 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be TAMPA 23 28 Trust Fund Contribution Added to Fees Zip Country This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. □No 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FEYL, JOHN W Name 14011 MIDDLETON WAY 82 Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33624** 83 84 City Zip Code 85 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. **SIGNATURE** Signature, typed or printed name of registered agent and tille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE Addition TITLE 1.1 TITLE BANKS, DENNIS NAME 1.2 NAME 4412 WALTHAM AVE STREET ADDRESS 1.3 STREET ADDRESS TAMPA FL 1.4 CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREFT ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELE1E Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - \$1 - 7IP DELETE Change Addition TITLE 6.1 THLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP

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 to supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corposition 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.

CICHATUDE

SKILLING URSTANDURFED

7/29/27

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