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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

1. Corporation Name

(0)

D & D PUMPING, INC.

Principal Place of Business	Mailing Address	
57500 MORTON ST	57500 MARTON ST	
MARATHON FL 33050	MARATHON FL 33050	
US	US	

FILED Feb 13 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										- L INDIABAN AND AND AND AND AND AND AND AND AND A	N IIDI AIDII BIO	/## 			
57500 MORTON ST MARATHON FL 33050					57500 MARTON ST MARATHON FL 33050					DO NOT WRITE IN THIS SPACE					
U	IS				US					3. Date Incorporated or Qualified	E IN TRIS S	SPACE			\neg
										09/07/1984					ļ
2. Principal Place of Business					2a. Mailing Address					4. FEI Number			Appl	ied For	
21					26					<u>59-2449514</u>				Applicabl	е
Suite, Apt. #, etc.					Suito, Apt. #, etc.					5. Certificate of Status Desired			5 Ad Requ	ditional uired	
23	City & State				City & State					Election Campaign Financing Trust Fund Contribution			00 M led to	ay Be Fees	
_	lip.	p Country			Zip Count			lry		8. This corporation owes or has paid the current year Intangible					
24			25		9		30			Personal Property Tax due Jun		Yes		No	_
<u> </u>			and Address	or Current He	gistered	Agent		11	Name	10. Name and Address of New R	egistered A	rgent			
		VANS, DEN						_							
57500 MORTON ST							2	Street Addre	ss (P.O. Box Number is Not Accepte	ible)				_	
MARATHON FL 33050								33							
							3	4	City		FL	85 Z	Zip Co	de	
	office or r	egistered ag	ent, or both, in:	the State of F	lorida Suc	8, Florida Slatut th change was a on 607.05 05 , Flo	authorized	by	the corporation	oration submits this statement for the on's board of directors. I hereby accepts	purpose of ept the appo	changin bintment	ig its r as re	egistered gistered	1
SIGN	NATURE	Signature, typed	or ponied hame of re	gistered agent and	Little if applica	ble (NOT	E Registered /	Apon	al signature required	d when reinstating)	3fAQ				
12.			<u> </u>	ERS AND DI			13.	•		ADDITIONS/CHANGES TO OFF		DIRECT	FORS	IN 12	- 5
TITLE		PD				DELETE	1.1 1011	Ē				☐ Chang	ge	Addition	ा ह
NAME			s, donald a	ı			1.2 NAM	E	ł						3
STREE	T ADDRESS		MORTON ST				1.3 STRE	ET A	ADDRESS						Š
	ST-ZIP	MARA	THON FL				1.4 CITY		- ZIP						<u>ئ</u> إ
TITLE		V	N DAVAD I			DELETE	21 1111					L Chang	ge (Addition	۱۱۲
NAME			S, DAVIO L	•			2.2 NAM								
-	T ADDRESS		Porpoise de Thon f l	i.					ADDRESS						
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			, DENISE M.				3.1 (I) L					L CHAIR	¶n [
NAME	T ADDRESS		MORTON ST						ADDRESS						
	ST-ZIP		THON FL				3.4. CITY								Ì
TITLE	31-211					DELETE	4.1 TITLE		1-711			Chang	oe [Addition	<u></u>
NAME							4. 2 NAN								
	T ADDRESS						1		ADDRESS						ì
CITY-S							4.4 CITY								
TITLE						DELETE	5 1 TITLE					Chang	je [Addition	9
NAME							5.2 NAM	£							
STREET	T ADDRESS						5.3 STRE	ET A	ADDRESS						
CITY-S	ST-ZIP						5.4 CI1Y	· ST-	- ZIP						
TITLE						DELETE	6.1 TITLE					Chang	je T	Addition	i
NAME	ĺ						6.2 NAM	F							
STREET	T ADDRESS						6.3 STRE	ET A	ODRESS						
CITY-S	ST-ZIP						6.4 CITY	- \$T-	- ZIP						4

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 armual report is five 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.