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

**PROFIT CORPORATION** ANNUAL REPORT

1998



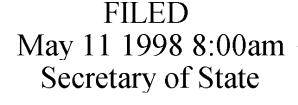
FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(4)

DURKEE ENTERPRISES, INC.



Principal Place of Business	Ma	ailing Address							
C/O THOMAS S. DURKEE 2830 NE 18TH ST. POMPANO BEACH FL 33084 US		C/O THOMAS S. DURKEE 2630 NE 18TH ST. POMPANO BEACH FL 33064 US			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  02/05/1988				
<del></del>		, Mailing Address			4. FEI Number Applied For				
21					65-0029321 Not Applicable				
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required				
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
24 25	29	Zip Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No				
g, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
DURKEE, THOMAS S. 2630 NE 18TH ST. POMPANO BEACH FL 33064			81 82 83						
				City	FL 85 Zip Code				
<ol> <li>Pursuant to the provisions of office or registered agent, or l agent. I am familiar with, and</li> </ol>	both, in the State of Florid	a. Such change was authoriz	ed by	the corporati	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered				
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)  DATE									

agent. I am familiar with, and accept the oringations of, Section boy.0500, Florida Statutes.											
SIGNATURE Signature, typed or printed name of registered agent and trife if applicable) (NOTE Registered Agent signature required when reinstating)  DATE											
12.	OFFICERS AND DIRECTORS				OFFICERS AND DIRECTORS IN 12						
TITLE	<b>D</b>	ELETE	1.1 TITLE		☐ Change	Addition					
NAME	Durkee, Thomas S.		1.2 NAME								
STREET ADDRESS	2630 NE 18TH ST.		1.3 STREET ADDRESS								
CITY-ST-ZIP	POMPANO BEACH FL		1.4 CITY-ST-ZIP								
TITLE	□ D	ELETE	2.1 TITLE		Change	Addition					
NAME			2.2 NAME								
STREET ADDRESS			2.3 STREET ADDRESS								
CITY-ST-ZIP			2 4 CITY+ST-ZIP								
TITLE	□ D	ELETE	31 TITLE		☐ Change	☐ Addition					
NAME			3 2 NAME								
STREET ADDRESS			3.3 STREET ADDRESS								
CITY-ST-ZIP			3.4. CITY-ST-ZIP								
TITLE	[ D	ELETE	4.1 TITLE		☐ Change	Addition					
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET ADDRESS								
CITY-ST-ZIP			4.4 CITY-ST-ZIP								
TITLE	L Di	ELET <b>E</b>	5.1 TITLE		Change	☐ Addition					
NAME			5.2 NAME								
STREET ADDRESS			5 3 STREET ADDRESS								
CITY-ST-ZIP			5.4 CITY-ST-ZIP								
TITLE	Di	ELETÉ	6.1 TITLE		☐ Change	Addition					
NAME			6.2 NAME								
STREET ADDRESS			6.3 STREET ADDRESS								

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 suppliemental 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.

THOMAS S. DURKEE MAY 1998