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Apr 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N98000000243 (1)

1. Corporation Name

DIAL A DAD INC.

Principal Place of Business

Mailing Address

737 FISHERMAN ST
OPA LOCKA FL 33054

737 FISHERMAN ST
OPA LOCKA FL 33054

3. Date Incorporated or Qualified

04/09/1997

4. FEI Number

65-0741597

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 80 E 37 ST.
Suite, Apt. #, etc.

26 80 E 37 ST.
Suite, Apt. #, etc.

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes

☒ No

23 City & State

HIALEAH FL.

24 Zip

33013

25 Country

DADE

27 City & State

HIALEAH FL.

29 Zip

33013

30 Country

DADE

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FUSSELL, MILTON E
737 FISHERMAN ST
OPA LOCKA FL 33054

81 Name

FUSSELL MILTON E

82 Street Address (P.O. Box Number is Not Acceptable)

80 E 37 ST.

83

84 City

HIALEAH FL.

FL

85 Zip Code

33013

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

FUSSELL MILTON E

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

4-17-98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

D
NAME FUSSELL, MILTON E
STREET ADDRESS 737 FISHERMAN ST
CITY-ST-ZIP OPA LOCKA FL 33054

1.1 TITLE ☒ Change ☐ Addition

D
1.2 NAME FUSSELL MILTON E
1.3 STREET ADDRESS 80 E 37 ST
1.4 CITY-ST-ZIP HIALEAH, FL. 33013

TITLE ☐ DELETE

D
NAME HICKEY, LAWRENCE
STREET ADDRESS 80 E 37 ST
CITY-ST-ZIP HIALEAH FL 33013

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE

D
NAME FERNANDEZ, FABIO
STREET ADDRESS 5505 NW 7TH ST #401
CITY-ST-ZIP MIAMI FL

3.1 TITLE ☒ Change ☐ Addition

D
3.2 NAME FERNANDEZ FABIO
3.3 STREET ADDRESS 80 E 37 ST
3.4 CITY-ST-ZIP HIALEAH FL. 33013

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

M E Fussell

MILTON E. FUSSELL 4-17-98

305-759-6866

CR2E037 (1097)