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 P92000001095 (8)

DELUDE ASSOCIATES, INC.

Principal Place of Business

Mailing Address

FILED May 12 1998 8:00am Secretary of State



FERN PARK FL 32730		FERN PARK FL 32730		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
Principal D	lace of Pusiness	Las Mailing Address			10/26/1992	
		2a. Mailing Address	_		4. FEI Number	Applied For
		Suite Apt # etc	Suile, Apl. #, etc.		59-2509370	Not Applicable
22		l—¬			5. Certificate of Status Desired	\$8.75 Additional
City & Stat	Α	City & State				Fee Required
23		} y			6. Election Campaign Financing	\$5.00 May Be
Zip	Country 7ip		Counti	·v	Trust Fund Contribution Added to Fees	
24	25	29	30	,	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
	9, Name and Address of Curr		1301		10. Name and Address of New Register	
DE	L UDE , ED	· · · · · · · · · · · · · · · · · · ·	81	Name	10,	
103 E LAUREN CT						
FERN PARK FL 32730			82 Street Add		dress (P.O. Box Number is Not Acceptable)	
I Cr	III FAIR TE 32/00		83	3		
			84	City	•	85 Zip Code
11 Pursuant	to the provisions of Sections 607.0	502 and 607 1508 Florida Stat	lules the abov	o named ee	poration submits this statement for the purpos	
onice or r	egistered agent, or both, in the Sta rn familiar with, and accept the obl	ite of Florida. Such change wa	is authorized b	by the corpora	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE	TO DESCRIPTION WITH A RELEASE OF THE CON	igations of, Section 607.6505,	TIOTUA SIAIUIC	15.		İ
SIGNATORE	Stonature, typed or printed name at registered a	agent and title if applicable (N	KITE Registered Ag	gont signature requ	irod when reinstating) DAT	·
12.		IND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PACS.	☐ DELETE	1.1 TOTALE			Change Addition
NAME	DE LUDE, EDWARD G		1.2 NAME			
STREET ADDRESS	103 E. LAUREN CT.		1.3 STREE	T ADDRESS		18
CITY-ST-ZIP	FERN PARK FL	_	1.4 CITY-	\$1-7IP		ر آزا
TITLE			2.1 TITLE			Change Addition
NAME			22 NAME			
STREET ADDRESS			23 STREET ADDRESS			•
CITY-ST-ZIP	MEMORIT COMMENTS		2. 4 CITY-	ST-ZIP		
TITLE			3.1 TITLE			☐ Change ☐ Addition
NAME	DELUDE, MARK		3.2 NAME	}		e e
STREET ADDRESS			3.3 STREE	1 ADDRESS		
CITY-ST-ZIP	FERN PARK FL		3 4. CITY-	ST-ZIP		
TITLE	EDWARD & Del	ude JR DELETE	4 1 TITLE			Change Addition
NAME	VP 146 GAS	HES CREEK RD	4 2 NAME			
STREET ADDRESS	AL MAR GIVE	AND CREEK KIN	4.3 STREE	T ADDRESS		
CITY-ST-ZIP	HONEUITE, IM	orth Carolina 2880	4.4 City-1	S1 - ZIP		
TITLE	DEST SPROOTH	☐ DELETE	5.1 TITLE			Change Addition
NAME	A De Cara	7	£2NAME			
STREET ADDRESS	ASST SECRETH	1 534 EIDORAL	5.3 STR E	1 ADDRESS		
CITY-ST-ZIP	ATECIA	CASSEL berg 7	5.4 City - 1	1		
TITLE		DELETE	6.1 TITLE	· · · ·		Change Addition
NAME			6.2 NAME			s.a.igo ridottati
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP			64 CITY-5	į.		
OH 1 THE SER			■ 0.4 U11 Y - 3	21-71F		

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