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



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 21 1997 8:00am Secretary of State

1	MENT # P9300(N'ESTMENTS, INC.	0004948 (4)		i (Cour Book) (Kana Kana Bana Bana Book)
Principal Plac	e of Business	Mailing Address		tidufiuur filk lulur filki uukki uuki uuki	
5211 S WASHINGTON AVE 5211 S WASHINGTON AV			AVE		
TITUSVILLE FL 32780 TITUSVILLE FL 32780				DO NOT WRITE	INITHE COACE
				Date Incorporated or Qualified	3a, Date of Last Report
				01/15/1993	05/01/1996
2. Principal P	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21 26		26		59-3220928	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27				Fee Required	
City & State City		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation owes or has paid	Added to Fees
24	25	29	30	Personal Property Tax due June 3	
	g. Name and Address of Curren			10. Name and Address of New Reg	
WE	LK, DONALD F.		81 Name		
5211 S. WASHINGTON AVE			82 Street Add	iress (P.O. Box Number is Not Acceptabl	6)
TITUSVILLE FL 32780					
			83		
			84 City		85 Zip Code
11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above				dia sub-it-thi-states of the	FL S Zip coos
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered age	ations of, Section 607.0505,	s authorized by the corpora Florida Statutos. OTE Registered Agent signature requ	tion's board of directors. I hereby accept ared when reinstating)	The appointment as registered
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PSD WELK DONALD E	DELETE	1.1 Trīle		Change Addition
NAME	WELK, DONALD F 5211 S WASHINGTON AVE		1,2 NAME		
STREET ADDRESS	TITUSVILLE FL 32780		1.3 STREET ADDRESS		
CITY-ST-ZIP	THOUSILLE PE S2780	DELETE	1.4 CITY - ST - ZIP 2 1 TITLE		Change Addition
NAME		<u> </u>	2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELFTE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CHY-ST-ZIP		Change Addition
TITLE			5 1 TITLE		CT change CT Addition
NAME CTOCCT ADDRESS			5.2 NAME		
STREET ADDRESS City-St-Zip			5.3 STREET ADDRESS 5.4 CITY+ST+ZIP		
TITLE		DELFTE	6.1 TITLE		☐ Change ☐ Addition
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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

7/11/0- 10-7/0.001

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 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 P93000004948 (4) DOCUMENT # DDP INVESTMENTS, INC. Principal Place of Business Mailing Address 5211 8 WASHINGTON AVE 5211 S WASHINGTON AVE TITUSVILLE FL 32780 TITUSVILLE FL 32780 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 01/15/1993 .05/01/,1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-3220928 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Added to Fees Trust Fund Contribution 28 Ζφ Country Country This corporation owes or has paid the current year Intensible Personal Property Tax due June 30. ☐ Yes 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name WELK, DONALD F. 5211 S. WASHINGTON AVE 82 Street Address (P.O. Box Number is Not Acceptable) TITUSVILLE FL 32780 83 84 City 85 Zip Code 11. Pursuant to the provisions of Soctions 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, Soction 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Addition TITLE 1.1 HTLE Change WELK, DONALD F 1.2 NAME NAME CR2E034 5211 S WASHINGTON AVE 1.3 STREET ADDRESS STREET ADDRESS TITUSVILLE FL 32780 CITY-ST-ZIP 1.4 CITY-\$1-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change ■ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 62 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 C(1) - ST - Z(P CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filling 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 eath; 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 atlachment with an address.

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