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

PROFIT
CCRPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secreta y of State
DIVISION OF CORPORATIONS

DOCUMENT # P9300004948

Corporation Name

DDP INVESTMENTS, INC.

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90198 036 ***150.00



Principal Place	e of Business	Mailing Address	Mailing Address						
5211 S WASHINGTON AVE		5211 S WASHINGTON AVE							
TITUSVILLE FL 32780		TITUSVILLE FL 32780		DO NOT WRITE IN THIS SPACE					
					3. Date Incorporated or Qualifed	I E IN I HIS	SPACE		
					01/15/1993				
2. Principal Place of Business 2a. Mailing Address					4. FEI Number				
—	lace of busiless	26			59-3220928			Applied For Not Applicable	
Suite, Apr.	# etc.	Suite, Apt. #, etc.			\$8.75 Additional				
22	,, 5	27			5. Certificate of Status Desired Fee Required				
City & State		City & State			6. Election Campaign Financing \$5.00 May Be				
23	28			Trust Fund Contribution			Added	to Fees	
Zip 、	Country	Zip Country			8. This corporation owes the curr	ent year Int		North.	
24	25	29 30	<u>' </u>		Personal Property Tax.		∐ Yes	No.	
	9. Name and Address of Current	Registered Agent	04	Name	10. Name and Address of New F	egistered .	Agent		
WELK, DONALD F.			81		Roman Inochovsky				
	S. WASHINGTON AVE		82	Street	Address (P.O. Box Number is Not Accepta	ible)			
	SVILLE FL 32780		83		<u>8814 Bay Harbour B</u>	Lvd.			
1110	OVILLE I E OZIOO		63			_			
			84	_ ′	Orlando	FL.	85 32		
11. Pursuan to the provisions of Sections 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 -forida. Such change was authorized by the corporation's board or directors. Thereby accept the appointment as registered									
SIGNATURE	2611	OVSky 4- M	e 7	?					
Signature, freed or printed name of segistered agent at dittle if applicable. (NOTE: Res				nt signature n	equire of when reinstating) ADDITIONS/CHANGES TO OF	ONIL		ORS IN 12	
12.	PSD CFFICERS AND	XDELETE	13.	_	President	TOERO AL	Change		
NAME	WELK, DONALD F		1.2 NAME					-	
STREET ADDRESS	5211 S WASHINGTON AVE			TADDRESS	Roman Inochovsky 8814 Bay Harbour	31vd.		ļ	
CITY-ST-ZIP	TITUSVILLE FL 32780		1.4 CITY-S			2836			
TITLE	T	DELETE	2.1 TITLE		Ψ		Change	X A Addition	
NAME	RYAN, BEVERLY		2.2 NAME		Virginia Porter				
STREET ADDRESS	5211 S WASHINGTON AVE	AVE 23		T ADDRESS			nue		
CITY-ST-ZIP	TITUSVILLE FL 32780		2 4 CITY-	24cmy-sr-zp Titusville, FL 3278					
TITLE		☐ DELETE	31 TITLE				Change	e 🗍 Addition	
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS				j	
CITY-ST-ZIP			3 4. CITY-5	ST-ZIP					
TITLE		☐ DELETE	4.1 TITLE				Change	e [] Addition	
NAME			4. 2 NAME					ļ	
STREET ADDRESS				TADDRESS					
CITY-ST-ZIP			44 CITY-S	T-ZIP			Change	e [] Addition	
"""	1	☐ DELETE	5.1 TITLE 5.2 NAME	'			Change	(Tydorion (
NAME				T ADDRESS I				Į.	
STREET ADDRESS			5.3 STREE						
CITY-ST-ZIP		☐ DELETE	6.1 TITLE	1- £1T			Change	e [] Addition	
TITLE			6.2 NAME				_ 5,19		
NAME				T ADDRESS					
STREET ADDRESS			64 CITY S)	

14. Thereby 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 cer ify 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 of the receiver or trustee empowered to execute this report as required by Chapter (07, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, 6 non an attachment with an address, with all other like empowered.

SIGNATURE:

URL AND TYPED OR PRI THE NAME OF SIGNING OFFICER OR DIRECTOR

4-26-99

407-348-3402

D. ytime Pt