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 #

STREET ADDRESS

CITY-ST-2IP

P93000076682 (2)

L & D SALES, INC.

FILED Jun 04 1998 8:00am Secretary of State

District Div	(D)	Mary Andrew				
Principal Place		Mailing Address				
1 1046 SALMON ISLE 1046 SALMON ISLE WPB FL 33413 SUITE 826						
US W PALM BEACH F			J3413		DO NOT WRITE IN TH	HIS SPACE
		U\$			3. Date Incorporated or Qualified 11/05/1993	
2. Principal P	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		·	65 -0447545	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23					Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Countr	У	8. This corporation owes or has paid the	
24	25	29]	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	aur Madistalag Wallit	8.	Name	10. Name and Address of New Register	ea Agent
FERGUSON, DAWN			١	Namo		
1	48 S almon Isle		82	Street Add	dress (P.O. Box Number is Not Acceptable)	
	TE 826		8:			
l w	PALM BEACH FL 33413		0.	'		
			84	City		85 Zip Code
44 5	60.00	00 - 1007 4500 51-11-01-1			rporation submits this statement for the purpos	L 65 Zip Code
office or n agent. La SIGNATURE	egistered agent, or both, in the Star m familiar with, and accept the obli-	gations of, Section 607.0505, FI	lorida Statute	es.	ation's board of directors. I hereby accept the autientic board of directors. I hereby accept the autientic board of directors. I hereby accept the autientic board of directors.	
12.		ND DIRI CTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	-		1.5 TITLE			Change Addition
NAME	FERGUSON, DAWN		1.2 NAME			
STREET ADDRESS	1046 SALMON ISLE			T ADDRESS		
CITY-ST-ZIP	WPB FL		1.4 CITY-ST-ZIP			
TITLE	D					Change Addition
NAME	Ferguson, Grover L		2.2 NAME			
STREET ADORESS	1046 SALMON ISLE		2.3 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CITY	ST-7IP		
TITLE		LI DITETE	3 1 TITLE			Change Addition
NAME			3.2 NAME	1		
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY-	-ST-71P		
TITLE		L DELETE	4 1 THILE			Change Addition
NAME			4. 2 NAMI			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	5.1 HILE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST - ZIP		
TITLE		DELFTE	6.1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I hereby certify that the information supplied with this filing doos 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 attachingent with an address.