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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P9400001741 (5)

DA-BET & COMPANY, INC.

Principal Place of Business

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Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



106 HANSON SOURT 106 HANSEN COURT INTERLACHEN FL 32148 INTERLACHEN FL 32148 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/03/1994 2. Principal Place of Business 21 /06 HANSON 2a, Mailing Address FEI Number Applied For 104 HANSON 26 59-3219145 Not Applicable Suite, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees This corporation owes or has paid the current year Intangible U.S.A. U. S. A. □Ño Yes Yes 29 Personal Property Tax due June 30. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 ADKISSON, MICHAEL R Name **106 HANSON COURT** 82 Street Address (P.O. Box Number is Not Acceptable) INTERLACHEN FL 32148 83 City 84 85 Zip Code 11. Pursuant 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 Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typicd or printed hance of registered agent and trie if applicable (NDIE: Registered Agent signature required when reinslating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 11111E ADKISSON, MICHAEL R NAME 1.2 NAME **106 HANSON COURT** STREET ADDRESS 1.3 STREET ADDRESS INTERLACHEN FL CITY-ST-ZIP 1.4 City - ST- ZiP DELETE 2.1 TITLE Change Addition TITLE ADKISSON, TEJU C NAME 2.2 NAME **106 HANSON COURT** STREET ADDRESS 2.3 STREET ADDRESS INTERLACHEN FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 71TLF NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4 4 CITY - ST-7/P CITY-ST-ZIP DELFTE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST- ZIP 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 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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4/4/100 end 338-0321