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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 7940000 2660 1. Corporation Name DAYEND

Principal Place of Business

Mailing Address

FILED Apr 08, 1999 8:00 am Secretary of State

04-08-1999 90036 026 ***150.00

N. MiANU, FL.	ST 600 JULISIAE W. SULISIAE, FL. 33154		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3. Language of the second of the seco			
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For		
21	26		63.048-1029	Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State			_6. Election Campaign Financing	\$5.00 May Be		
28		- -	Trust Fund Contribution	Added to Fees		
Zip Country 24 25	Zip Cot 30	untry	This corporation owes the current year la Personal Property Tax.	ntangible ☐ Yes ☐ No		
Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
CASEY VALEDIA M. 875'N.E. 125 H.St N. MiANG - F.L. 33161		81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83				
		84 City	FI	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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re	gistered Agent signature re	quired when reinstating)	DATE		
12.	QFFICERS AND DIRECTORS		ADDITIONS/CHANGE	S TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	POFSIGEL DELETE	1.1 TITLE			Change	Addition
NAME	CAREU VALEDIA M.	1.2 NAME				ļ
STREET ADDRESS	CHOCK TO THE STATE OF THE STATE	1.3 STREET ADDRESS				į
CITY-ST-ZIP	073 N.E. 125Th St N./N. FL. 3314	1.4 CITY-ST-ZIP				
TITLE	PRESIDENT DELETE CASEY, VALEDIA M. 875 N.E. 125 TL ST, N.M.FL. 3314	2.1 TITLE			Change	☐ Addition
NAME		2.2 NAME				
STREET ADDRESS		2.3 STREET ADDRESS				ļ
CITY-ST-ZIP		2.4 CITY-ST-ZIP				
тт ғ		3.1.TITLE			Change	Addition
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				į
CITY-ST-ZIP		3.4. CITY-ST-ZIP		·		
TITLE	☐ DELETE	4.1 TITLE		7.4.	Change	☐ Addition
NAME		4. 2 NAME				
STREET ADDRESS		4.3 STREET ADDRESS				{
CITY-ST-ZIP		4.4 CITY-ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				{
C/TY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE	☐ DELETE	6.1 TITLE			Change	☐ Addition
NAME _		6.2 NAME				
STREET ADDRESS	·	6.3 STREET ADDRESS	ı			
CITY-ST-ZIP		6.4 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 or Block 14 or Block 1

SIGNATURE

CR2E034 (11/98)