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 # P9400045656 (3)

Country

25

DAZZLIT, INC.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

SIGNATURE:

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Ζiρ

Principal Place of Business Mailing Address

2520 B MCMULLEN BOOTH ROAD P O BOX 305
CLEARWATER FL 34621 CLEARWATER FL 34617
US US

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2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

FILED Feb 06 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

☐ Yes

Not Applicable

3. Date Incorporated or Qualified

06/17/1994

59-3249817

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

4. FEI Number

9. Name and Address of Current Hegistered Agent			10. Name and Address of New Hegistered Agent
BROWN, SUSAN J 3006 EAGLES LANDING CIR W		1	Name
		82 Street Address (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34621	83	,	
	00]	
	84	\$ C	City FL 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			<u> </u>
		jent si	signature required when relinstating) DATE
12. OFFICERS AND DIRECTORS TIME OP	13.	_	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	1.1 TITLE		i Change Li Audition
NAME BROWN, SUSAN J	1.2 NAME		
STREET ADDRESS 3006 EAGLERS LANDING CIR W	1.3 STREET ADDRESS		DRESS
CITY-ST-ZIP CLEARWATER FL	1.4 CITY-ST-ZIP		
TITLE DST DELETE	2.1 TITLE		Change Addition
NAME BROWN, STEPHEN D	2.2 NAME		
STREET ADDRESS 3006 EAGLES LANDING CIR W	2.3 STREET ADDRESS		DRESS
CITY-ST-ZIP CLEARWATER FL	2. 4 CITY-ST-ZIP		
TITLE	3.1 TIYLE		Change Addition
NAME	3.2 NAME		
STREET ADDRESS	3.3 STREET ADDRESS		DRESS
CITY-ST-ZIP	3.4. CITY - ST - ZIP		
TITLE DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME .	4. 2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		DRESS
CITY-ST-ZIP	4.4 CITY - S	ST-ZII	
TITLE DELETE	5.1 TITLE		Change Addition
NAME	5.2 NAME		
STREET ADDRESS	5.3 STREE	T ADD	DRESS
CITY-ST-ZIP	5.4 CITY-5	ST-ZI	
TITLE DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	6.2 NAME		
STREET ADDRESS	5.3 STREET	6.3 STREET ADDRESS	
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			

RE BEQUIRED

Country

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