SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000008547 (8)

DUNEL	BUILDING CORP. INC.				1 18818 18 1881 1881 1881 1881 1881	
Principal Plac	e of Business	Mailing Address			I LOGNIGAL ILO IBLO DIUN DONI DONIS DONIS DONIS	Minime sacut Astes Athly 1881 (88)
4577 GUNN HIGHWAY SUITE 202 TAMPA FL 33624		4577 GUNN HIGHWAY Suite 202 Tampa Fl 33624			DO NOT WRITE IN THIS S PACE	
					3. Date Incorporated or Qualified 01/27/1995	
Suite, Apt. #, etc.		2a. Mailing Address			4. FEI Number	Applied For
		26	26		59-3301087	Not Applicable
		Suite, Apt. #, etc.				\$8.75 Additional Fee Required
City & Sta	te	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip	30 Cou	untry	8. This corporation owes or has paid the cu	
<u> </u>	9. Name and Address of Currer		1221	1	10. Name and Address of New Registered	
Lyons, R obert				81 Name		
8635 LEIGHTON DR. TAMPA FL 33614			82 Street Address (P.O. Box Number is Not Acceptable) 83			
						84 City
			agent. I SIGNATURE	am familiar with, and accept the oblig		
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	P	DELETE	1.1 7)	TLE		Change Addition
NAME	NOBLE, RICHARD A		1.2 N/	AME		
STREET_ADDRESS	11622 COUNTRY RUN RD.		1.3 \$1	TREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33624			TY-ST-ZIP		
TITLE	S LODY A	L DELETE	2.1 TI	1		Change Add/tion
NAME	NOBLE, JODY A 11622 COUNTRY RUN RD.		2.2 N/	Į.		· ·
STREET ADDRESS	TAMPA FL 33624			REET ADDRESS		
CITY-ST-ZIP	1AMFA FL 33024		3.1 TI	TY-ST-ZIP		
NAME	i	Therese				
		DELETE				Change Addition
STREET ÄNDRESS	-	DELETE	3.2 N	AME		Change Addition
	-	DELETE	3.2 N/ 3.3 ST	AME TREET ADDRESS		Change Addition
CITY-ST-ZIP			3.2 N/ 3.3 ST	AME TREET ADDRESS TTY-ST-ZIP		
CITY-ST-ZIP TITLE		☐ DELETE	3.2 N/ 3.3 ST 3.4 CI	AME IREET ADDRESS ITY-ST-ZIP TLE		Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.2 N/ 3.3 ST 3.4 CI 4.1 TI 4.2 N/	AME IREET ADDRESS ITY-ST-ZIP TLE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS			3.2 N/ 3.3 ST 3.4 Cl 4.1 Tl 4.2 N/ 4.3 ST	AME IREET ADDRESS ITY-ST-ZIP TLE		
CITY-ST-ZIP TITLE NAME			3.2 N/ 3.3 ST 3.4 Cl 4.1 Tl 4.2 N/ 4.3 ST	AME IREET ADDRESS ITY-ST-ZIP TLE AME IREET ADDRESS ITY-ST-ZIP		

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 if changed, or on an attachment with an address.

DELETE

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

8/14/20

017963 4519

Change Addition

Aug 20 1998 8:00am

Secretary of State