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PROFIT CORPORATION ANNUAL REPORT

1998



Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000020885 (6)

D&A	INTERNATIONAL, INC.					
Principal Plac	e of Business	Mailing Address	• • • • • • • • • • • • • • • • • • • •		- I HARIIYANI IIM LAYAL AIŞIF ARIIN ŞANIY DOLIY REYLE	tebri dorda inina istāl šili indr
5020 38TH AVE. NORTH ST. PETERSBURG FL 33710		5020 38TH AVE. NORTH ST. PETERSBURG FL 33710		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2 Principal P	lace of Business	2a. Mailing Address		-	03/13/1995 4. FEI Number	Applied For
}		- 1	26		59-3299484	Not Applicable
Suite, Apt #, etc.		Suile, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	n	City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the	current year Intangible
24	25 29 30		30		Personal Property Tax due June 30. Yes No	
	g. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Register	ed Agent
AMBROSE, C. ALLEN			L.L			
5020 38TH AVE. NORTH ST. PETERSBURG FL 33710			82	Street Addre	ss (P.O. Box Number is Not Acceptable)	
ST. PETERSOUNG PL 337 IU			63			
			84	City		B5 Zip Code
				,	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-national office or registered agent, or both, in the State of Florida. Such change was authorized by the agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					pration submits this statement for the purpose on's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE	<u></u>		~ ~ ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~			
12.	Signature typodior printed nimic of regent red age OFFICERS ANI		Hogistered Agen	t signature required	d when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D OTTO NO ANN	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	AMBROSE, C. ALLEN		1.2 NAME	Ì		
STREET ADDRESS 5020 38TH AVE. NORTH			1.3 STREET ADDRESS			.]
CITY-S1-ZIP	ST. PETERSBURG FL 33710		1.4 CITY-ST-ZIP			
TITLE	D DOLLHOSON BIOLINDS	☐ DELETE	21 TITLE	İ		Change Addition
NAME	D. T.		2.2 NAME			
STREET ADDRESS			2.3 STREET A			
CITY-ST-ZIP TITLE	DANGO FE 04044	DELETE	2. 4 CITY-ST 3.1 THILE	- 417	4.01-10-11	Change Addition
NAME			3.2 NAME			_ •
STREET ADDRESS	s		3.3 STREET A	DORESS		
CITY-ST-ZIP			3.4. CHTY-S1	- ZIP		1
TITLE	ì		4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET A			
CITY-ST-ZIP TITLE			4.4 CITY - ST - ZIP 5.1 TITLE			Change Addition
NAME		Part of the	5.2 NAME			
STREET ADDRESS			5.3 STREET A	NDORESS		Ì
CITY-ST-ZIP			5.4 CITY - ST	- ZIP		
TITLE		☐ DELETE	6.1 TITLE			Change Addition

14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607 are attraction in an address.

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS

3-1-98

FILED

Mar 06 1998 8:00am

Secretary of State