4-28-98 B 5732 C 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 # P95000022770 (8)

3 D COMMERCIAL SERVICES INC.

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FILED

Apr 28 1998 8:00am

Secretary of State

FORT Myers, FL 33912 FORT MyERS, FL 33912					DO NOT WRITE IN THIS SPACE		
lock inges, = == iva lock inge						(
						03/20/1995	
2. Principal Place of Business 2a. Mailing Address							lied For
Sulte, Apt. #. etc.		26				Applicable	
		Suite, Apt. #, etc.				5. Certificate of Status Desired See Reg	
City & State	City & State	talo					
23	•	28				6. Election Campaign Financing \$5.00 M Trust Fund Contribution Added to	
Zip	Country Zip		Cou	Country			
24	25	29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	
47	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
				81	Name		
Darling, Michael L 2870 e stero blyd							
FT MYERS BEACH FL 33931				82 Street Address (P.O. Box Number is Not Acceptable)			
PI MIENS DEACH PL 33931			ł	83			
			[
				84	City	EL 85 Zip Co	ode
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 re	egletered ag ent, or both, in the State i m fam iliar with, and accept the obliga	of Florida. Such change was tions of Section 607.0505. Fl	authorized orida State	d by utes	the corporation	tion's board of directors. I hereby accept the appointment as re	gistered
SIGNATURE			V 1100 D101		•		I
SIGNATURE	Signature, typed or proted name of registered ager	Land title if applicable (NO)	It. Registered	Ager	nt signature require	ed when reinstating) DATE	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	☐ DELETE	1.1 111	l E	1	Change	
NAME DARLING, MICHAEL L			1.2 NA	1.2 NAME			
STREET ADDRESS 2870 ESTERO BLVD			1.3 ST	1.3 STREET ADDRESS			
CITY-ST-ZIP	FT MYERS BEACH FL 33931			1.4 CITY-ST-ZIP			
TITLE		☐ DELETE	2.1 711	LE		Change	
NAME			2.2 NA	ME			
STREET ADDRESS			2.3 ST	REE1 /	ADDRESS		
CITY-ST-ZIP				2. 4 City - ST - ZiP			
TITLE		☐ DELETE	3.1 TIT	LE		Change	■ Addition
NAME			3.2 NA	MŁ	J		
STREET ADDRESS			3.3 ST	REET A	ADDRESS		
CITY-ST-ZIP			3 4. CI	TY-S	1-21P		
TITLE		DELETE	4 1 TIT	LE		Change	Addition
NAME			4. 2 N/	ME			
STREET ADDRESS			4.3 ST	REFT	ADDRESS		
CITY-ST-ZIP			4.4 CI1	Y- \$1	í - ZIP		
TITLE		☐ DELETE	5.1 TIT	LE		☐ Change	☐ Addition
NAME	•		5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET	ADDRESS		
CITY-ST-ZIP	<u>. F</u>		5.4 Ci1	Y - ST	i- ZIP		
TITLE		DELETE	6.1 TIT	LF		☐ Change	☐ Addition
NAME			6.2 NA	ME			ļ
STREET ADDRESS	*		6.3 \$11	REET /	address		
CTT ST-ZIP	*		6.4 CIT	Y-S1	(- Z IP		

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 in stated on this around report or supplemental rimust 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 conjugation or the ecciver 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 chapted, or organ attachment with an address.

SIGNATURE. AVIII MALE

4/1/98

(941)454-404D