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PROFIT CORPORATION ANNUAL REPORT

1998

CICNATI IDE.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 28 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000045902 (0)

D&A DELIVERY SERVICES, INC.

Principal Place of Business Mailing Address 5980 66TH STREET, NORTH 5980 66TH STREET, NORTH UNIT # N UNIT D N DO NOT WRITE IN THIS SPACE ST. PETERSBURG FL 33709 ST. PETERSBURG FL 33709 3. Date incorporated or Qualified 06/08/1995 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 59-3328016 Not Applicable 21 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6, Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Ζip Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GUSTIN, JERRY S JR. 5980 66TH STREET, NORTH Street Address (P.O. Box Number is Not Acceptable) UNIT K 83 ST. PETERSBURG FL 33709 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Ftorida Statutes, the above-named corporation submits this statement for the purpose of changing its 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 it applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE Change Addition NAME GUSTIN, DEBORAH A 1.2 NAME 5980 66TH STREET, NORTH, UNIT & ル STREET ADDRESS 1.3 STREET ADDRESS ST. PETERSBURG FL 33709 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE Change 2.1 TITLE Addition DOYLE, AYESHA NAME 2.2 NAME 5980 66TH STREET, NORTH, UNIT I N STREET ADDRESS 2.3 STREET ADDRESS ST. PETERSBURG FL 33709 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change TITLE DELETE 3.1 TITLE Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CiTY-ST-ZiP DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETÉ Change Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 affactment with an address.

BORAL GUSTIN