MOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750). **PROFIT** CORPORATION

OND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** Jul 08, 1999 8:00 am Secretary of State 07-08-1999 90015 004 ***150.00

FILED

1999

ANNUAL REPORT

MIRACLE STRIP PARKWAY

OCUMENT # Corporation Name	P95000065834
db daughters, in	S.

cipal Place of Business Mailing Address

12 MIRACLE STRIP PARKWAY



T WALTON BEACH FL 32548		FORT WALTON BEACH FL 32548			DO NOT WRI	TE IN THIS	SDACE			
								JI AOL		
						3. Date Incorporated or Qualified				
						08/25/1995 4. FEI Number			A 11-	
Principal Pla	ce of Business	2a. Mailing		$\Lambda_{u_{\ell}}$	2 K E			-	Applie	
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Suite, Apt#	,,etc	Suite, Apt. #, etc				5. Certificate of Status Desired			\$8:75 Additional Fee Required	
City & State City & State City & State 28 Ft. WALTON				eH.	FI	6. Election Campaign Financing Trust Fund Contribution Added to				
ip .	Country	Zip 29 3 2 5 4		Countr	у	8. This corporation owes the curr	ent year	Yes	×Ν	
1254 <u>0</u>				<u>"</u>		Intangible Personal Property. 10. Name and Address of New F	Ponietorod /		<u> </u>	
	9. Name and Address of Current	Registered Ag	ent	81	1 Name	to. Name and Address of New P	(afligrater A	Agerit		
HILL	LILLIAN B			"	Name					
	ST ST SE			82	2 Street Addr	ress (P.O. Box Number is Not Accepta	able)			
L1 M	ALTON BCH FL 32548			83	3					
				84	4 City		FL	85 2	ip Cod	le
				ho ===		notion submits this statement for the sa		angico **	e regist	ered
office or re	o the provisions of sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such	change was auth	norized b	v the corporation	ration submits this statement for the proof's board of directors. I hereby accept	ot the appoin	itment a	s regist	ered
-	n lamiliar with, and accept the obliga	dons or, section	007.0505, Florid	a Statute						
NATURE _	Ignature, typed or printed name of registered agent	and title if applicable.	(NOTE:	Registered	Agent signature requ	uired when reinstating)	DATE			
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July 2, 1999

Florida Department of State Division of Corporations

To Whom This May Concern:

On July 1,1999, DB Daughters, Inc. received the 1999 Profit Corporation Annual Report. We had not received any previous notice of this report. On today's date, 7/2/99, I called your office in Tallahassee to report that this was the first notice we had received and I was advised to fill out the form and submit it with \$150.00 (\$61.25 annual report fee + \$88.75 corporation supplemental fee) along with a letter of explanation. I have no other details that I can offer other than the fact that we did not receive any notice of a payment due other than that which was received on 7/1/99.

I appreciate your consideration in waiving the late fee in view of the facts stated above.

Yours truly,

Martha B. Garvie

Vice President, DB Daughters, Inc.

Mathe & Sancie

315 Shell Avenue, SE-

Fort Walton Beach, Florida 32548-5821