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 # P9500068514 (5)

FILED Mar 02 1998 8:00am Secretary of State

1. Corporation D.J. BR	Name INSON, I		00000011	+ (5)					
Principal Place of Business Mailing Address								IIDI (810) 8184 [il	014 0104 1 00 4
9896 DOGWOOD AVE 9696 DOGWOOD AVE							}		
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL						DO NOT WRITE IN THIS SPACE			
							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
							09/01/1995		
2. Principal Pla	ace of Busin	ess	2a. Mailing Ad	dress			4. FEI Number	A	oplied For
21			26	26			65-0605893		ot Applicable
Suite, Apt. #	#, etc.		Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
22			27				5, Commode of Octation Desired	Fee R	equired
City & State			—	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip				Zip Country			This corporation owes or has paid the current year Intangible		
24		25 29 30		30	Personal Property Tax due June 30. Yes No		□ No		
· · · · · · · · · · · · · · · · · · ·			urrent Registered Ager	nt	81		10. Name and Address of New Registered	Agent	
BRINSON, DONNA JO						Name			
9896 DOGWOOD AVE					82	Street Add	dress (P.O. Box Number is Not Acceptable)		
PALM BEACH GARDENS FL 33410					83				
					63				
					84	City	F	85 Zip	Code
11. Pursuant to office or re agent. I an	o the provisi gistered ag n familiar wi	ons of Sections 60 ent, or both, in the th, and accept the	7.0502 and 607.1508, FI State of Florida. Such ch obligations of, Section 6	orida Statute lange was al 07.0505, Flor	s, the above uthorized by rida Statutes	e-named cor the corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing in pointment as	ts registered registered
SIGNATURE _			red agent and title if applicable				uired when reinstalling) DATE		
12.	signature, typed		S AND DIRECTORS	(NOTE	13.	in signatore redu	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12
TITLE	p			DELETE	1.1 TITLE			Change	Addition
NAME BRINSON, DONNA J					1.2 NAME	İ			
STREET ADDRESS 9896 DOGWOOD AVE					1.3 STREET	ADDRESS			ŀ
CITY-ST-ZIP PALM BEACH GARDENS FL 33410					1.4 City - ST - ZIP				
TITLE				DELETE	2.1 TITLE			Change	☐ Addition
NAME					2.2 NAME		· · · · · · · · · · · · · · · · · · ·		
STREET ADDRESS					2.3 STREET	address			
CITY-ST-ZIP				DELETE	2.4 CITY - S	ST-ZIP		Change	Addition
TITLE			ت	DELETE	3.1 TITLE			Change	☐ MONROII
NAME PROCES ADDRESS					3.2 NAME	ADDDECO			
STREET ADDRESS					3.3 STREET 3.4. City - S	I			
CITY-ST-ZIP TITLE			<u> </u>	DELETE	4.1 TITLE	1-ZIF		Change	Addition
NAME			_		4. 2 NAME				
STREET ADDRESS					4.3 STREET	ADDRESS			
CITY-ST-ZIP					4.4 CITY - S				
TITLE	<u> </u>			DELETE	5.1 TITLE	` -		Change	Addition
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY - ST - ZIP					5.4 CITY - S	T- ZIP			
TITLE				DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME					6.2 NAME	ļ			ĺ
STREET ADDRESS					6.3 STREET	ADDRESS			
CITY-ST-ZIP					6.4 CITY - ST	T-ZIP			

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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attachment with an address.

LONATURE DANGE & SOLVER (DOLLING TO BRINSON) 2-24-98 50-844-8227