

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Oct 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070511 (7)

1. Corporation Name

DELTONA ROLLER SKATING CENTER, INC.



Principal Place of Business

Mailing Address

1680 DOYLE ROAD-
DELTONA FL 32738

120 INTERNATIONAL PARKWAY
SUITE 204
HEATHROW FL 32746

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/11/1995

4. FEI Number

59-3333915

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.



Yes No

2. Principal Place of Business

2a. Mailing Address

21 1680 Doyle Rd

26 1680 Doyle Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Deltona FL

28 Deltona FL

24 Zip

25 Country

29 Zip

30 Country

32738

USA

32738

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ESSKUCHEN, CHARLES JR.
120 INTERNATIONAL PKWY STE 204
HEATHROW FL 32746

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2016 Golden Arm Rd

83

84 City

Deltona

FL

85 Zip Code

32738

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 registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

CHARLES F. ESSKUCHEN JR.

PRESIDENT

9/24/98

SIGNATURE

Signature, Typed or printed name of registered agent and title if applicable

NOTE: Registered Agent signature required when reinstating

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE STD
NAME ESSKUCHEN, CHARLES F JR.
STREET ADDRESS 120 INTERNATIONAL PKWY STE 204
CITY-ST-ZIP HEATHROW FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

9/29/98 407-860 9561

CR2E034 (5/98)