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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000078847

DWIGHT GOODEN ENTERPRISES, INC.

Mailing Address

FILED Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90016 046 ***150.00



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C/O JUPITER 1	TAX CENTER	C/O JUPITER TAX CENTE	ER				
CHASEWOOD PLAZA STE 21, 6390 INDIANTOWN RD 27 PENNOCK LANE. SUITE							
JUPITER FL 33458 JUPITER FL 33458					DO NOT WRITE IN THIS SPACE		
US US		• -			3. Date Incorporated or Qualifed		
	•	00			'		
					10/10/1995		
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
24		26			65-0637821	·	Not Applicable
21		Suite, Apt. #, etc.			00 0001021	\$8.7	5 Additional
		— · ·	Suite, Apr. #, etc.		5. Certificate of Status Desired	Fee	
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City & Stat	te	City & State			6. Election Campaign Financing	· \$5.0	0 May Be
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	Country	Zip	Coun	in/	8. This corporation owes the curr	ont your Intensible	
Zip			_	u y		eni year mangiole ☐ Yes	⊡No
24	25	29	30		Personal Property Tax.		
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New F	Registered Agent	
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	4						
11. Pursuant	to the provisions of Sections 602,050	2 and 607:1508, Florida Statu	utes, the abo	ove-named co	rporation submits this statement for the	purpose of changing	its registered
office or i	registered agent, or both, in the State	of Florida. Such change was	authorized	by the corpora	ition's board of directors. I hereby accep	ot the appointment as	registered
agent. I a	am familiar with and accept the obligat	tions of, Section 607.0505, Fi	lorida Statut	es.	rporation submits this statement for the tion's board of directors. I hereby accep	1-15-99	a
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	Signature, typed of survey name of registered agen	,		gent signature requ	ADDITIONS/CHANGES TO OF	DATE	
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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 mister empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in indicated on this annual report or supplemental annual report is officer or director of the corporation or the receiver or director of the corporation or the receiver or disterior block 12 or Block 13 if changed, or on an attachment with an ar

CITY-ST-ZIP