SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

2001					
DOCU I. Corporatio	MENT # P950	000078848 (5)			
DDW.	INC.	, ,			
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rincipal Plac	ce of Business	Mailing Address			
PO BOX 150	<b>N</b> 3	PO BOX 15043			
	FL 34208-5043	BRADENTON FL 34208-50	043		
				3. Date Incorporated or Qualified	3a. Date of Last Report
Principal F	Place of Business	2a. Mailing Address		10/10/1995 4. FE! Number	
1		26 Ze		65-0614171	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	te	City & State			Fee Required
]	•	28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zιρ	Country	8. This corporation has liability for in	
<u> </u>	9. Name and Address of C	29	30	Florida Statutes	Yes No
LLAT		onen negistelea Agent	81 Name	10. Name and Address of New Reg	istered Agent
	ESTON, DAVID <del>5 N.E. 195</del> TH ST., APT. 225	•	82 Street Add	tress (PO Box Number is Not Acceptable	0)
	AMI FL 33179 —			dress (PO Box Number is Not Acceptable 26 727 57. W.	<del></del>
			83 # 7/	6	
			84 City Red	A DENTON	FL 85 Zip Code 34205
1. Pursuant	to the provisions of Sections 60	7 0502 and 607 1508, Florida Statute	es, the above-named corp	poration submits this statement for the pu	rpose of changing its registered
office or r agent I a	registered agent, or both, in the am familiar with, and accept the	State of Florida. Such change was a obligations of, Section 607.0505, Flo	utnorized by the corporati rida Statutes.	tion's board of directors. Thereby accept to	the appointment as registered
				ocration submits this statement for the purion's board of directors. Thereby accept to	the appointment as registered
IGNATURE	Signature typed per the I many of region	red agent and other appropria. (N-) (N-) (N-)	E. Bog stered Agent signature requi	ied who recutated)	CVIE
GNATURE	Signature typed per the I many of region		E. Biografored Agent signature required.  13. 11TIFLE D	ired when residency) ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR