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FILED
May 01 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P96000009638 (3)

1. Corporation Name

DARE TO DREAM, INC.

Principal Place of Business

Mailing Address

13621 MARSH HARBOR PLACE
TAMPA FL 33613

13621 MARSH HARBOR PLACE
TAMPA FL 33613

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1996

4. FEI Number

59-3361409

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

21 13404 MONTE CARLO CT.

Suite, Apt. #, etc.

22 #45

City & State

23 TAMPA, FL

Zip

24 33612

Country

25 U.S.A.

2a. Mailing Address

26 13404 MONTE CARLO CT.

Suite, Apt. #, etc.

27 #45

City & State

28 TAMPA, FLORIDA

Zip

29 33612

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

SANSONI, OSCAR G
13621 MARSH HARBOR PLACE
TAMPA FL 33613

10. Name and Address of New Registered Agent

81 Name

SANSONI, OSCAR G.

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

13404 MONTE CARLO COURT

83

APT # 45

84 City

TAMPA

FL

85 Zip Code

33612

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.

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

TITLE ☐ DELETE

NAME D
STREET ADDRESS SANSONI, LESLIE A
CITY-ST-ZIP 13621 MARSH HARBOR PLACE
TAMPA FL 33613

TITLE ☐ DELETE

NAME D
STREET ADDRESS SANSONI, OSCAR G
CITY-ST-ZIP 13621 MARSH HARBOR PLACE
TAMPA FL 33613

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME SANSONI, LESLIE A.

1.3 STREET ADDRESS 13404 MONTE CARLO COURT APT # 45

1.4 CITY-ST-ZIP TAMPA, FLORIDA 33612

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME SANSONI, OSCAR G.

2.3 STREET ADDRESS 13404 MONTE CARLO COURT APT # 45

2.4 CITY-ST-ZIP TAMPA, FLORIDA 33612

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

900002508099
-05/01/98--01079--006
***150.00

4/12/98 (813) 971 7885

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