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FILED

Apr 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000011287 (5)

1. Corporation Name

D & L ODOR CONTROL, INC.

Principal Place of Business

7015 N.W. 39TH COURT
CORAL SPRINGS FL 33065

Mailing Address

7015 N.W. 39TH COURT
CORAL SPRINGS FL 33065-2254

3. Date Incorporated or Qualified

02/06/1996

3a. Date of Last Report

2. Principal Place of Business

21 3967 Carambola Cr. N.
Suite, Apt. #, etc.

2a. Mailing Address

26 3967 Carambola Cr. N.
Suite, Apt. #, etc.

4. FEI Number

65-0642156

Applied For

Not Applicable

22 City & State

23 Coconut Creek, FL

27 City & State

28 Coconut Creek, FL

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

24 Zip

33066

Country

USA

29 Zip

33066

Country

USA

9. Name and Address of Current Registered Agent

MEADOWS, DONALD L
7015 N.W. 39TH COURT
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name Donald L. Meadows
82 Street Address (P.O. Box Number is Not Acceptable)
3967 Carambola Cr. N.
83
84 Coconut Creek FL 85 Zip Code 33066

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

Donald L. Meadows

Donald L. Meadows

4-19-97

(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	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
PD	MEADOWS, DONALD L	7015 N.W. 39TH COURT	CORAL SPRINGS FL 33065	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	Change	Addition
PD	Donald L. Meadows	3967 Carambola Cr. N.	Coconut Creek, FL 33066	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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:

Donald L. Meadows

Donald L. Meadows

4-5-97

954 2544125

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0150711

CR2E034 (9/96)