## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000037909

1. Corporation Name

DUONE, AND SMITH ENTERPRISES INC

## **FILED** Mar 14, 1999 8:00 am Secretary of State

03-14-1999 90007 026 \*\*\*150.00

Principal Place 2140 21ST AVE ST. PETERSBUR	NUE. NORTH	Mailing Address 2140 21ST AVENUE. NORT									
OT. PETERIODOI	10 12 00/10	OI. I EI EI OOO I E GOTT	-				DO NOT WRIT	E IN THIS	SPACE		
						3	Date Incorporated or Qualifed 04/29/1996				
2. Principal P	face of Business	2a. Mailing Address				4	i. FEI Number		Ap	plied For	l
21		26					59-3376901		No	t Applicable	l
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					Cartifactor of Status Decised		\$8.75 △	dditional	l
22		27				"	5. Certifcate of Status Desired		Fee Re	quired	l
	e	City. & State		-		E	Election Campaign Financing		\$5:00°	* 1	i
23		28					Trust Fund Contribution		Added t	o Fees	1
Zip	Country	Zip	$\overline{}$	untry		8	3. This corporation owes the curre	ent year Int			l
24	25	29	30	1			Personal Property Tax.	1.4		□No	ł
	9. Name and Address of Current	Registered Agent		81	Name	10	). Name and Address of New R	registered .	Agent		i
BHO	NE, RUDY A			61	Name						
	21ST AVENUE, NORTH			82	Street Add	dress (	P.O. Box Number is Not Accepta	ible)			}
	PETERSBURG FL 33713			22						_	1
01. 1	E LENOBONG TE SOI 10			83			•				l
				84	City			FL	85 Zip C	ode	l
		1 00 7 4500 Firstly Orang	45			ti	an authority this statement for the		changing its	registered	ł
11. Pursuant office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	? and 607.1508, Florida Statut of Florida. Such change was a	es, tne a uthorize	above-i	named cor ne corporat	rporau ition's l	on submits this statement for the board of directors. I hereby accep	t the appoi	ntment as rec	gistered	l
agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Flo	rida Stat	tutes	•						ł
SIGNATURE	Signature, typed or printed name of registered agent										4
			-			inad do.	a councioline)	DATE		_	- ا
40			_		signature requir	ired wher		DATE FICERS AN	ID DIRECTO	RS IN 12	-( <u>6</u>
12.	OFFICERS AND	DIRECTORS	13.		signature requir	ired wher	n reinstating) ADDITIONS/CHANGES TO OFF		ID DIRECTO	RS IN 12	11/98)
TITLE	OFFICERS AND		13.	· ·	signature requir	ired wher					(11/98)
TITLE NAME	PD RHONE, RUDY A	DIRECTORS	13. 1.1 T 1.2 N	TITLE NAME		ired when					5034 (11/98)
TITLE NAME STREET ADDRESS	OFFICERS AND PD RHONE, RUDY A 2140 21ST AVENUE, NORTH	DIRECTORS	13. 1.1 T 1.2 N 1.3 S	TITLE NAME STREET A	DORESS	ired wher					RZE034 (11/98)
TITLE  NAME  STREET ADORESS  CITY-ST-ZIP	OFFICERS AND PD RHONE, RUDY A 2140 21ST AVENUE, NORTH ST. PETERSBURG FL 33713	D DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C	TITLE NAME STREET A	DORESS	ired wher					CR2E034 (11/98)
TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE	PD RHONE, RUDY A 2140 21ST AVENUE, NORTH ST. PETERSBURG FL 33713 SD	DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T	TITLE  STREET A  CITY-ST-2	DORESS	ired wher			Change	☐ Addition	CR2E034 (11/98)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD RHONE, RUDY A 2140 21ST AVENUE, NORTH ST. PETERSBURG FL 33713 SD SMITH, SIEGMUND W	D DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N	TITLE NAME STREET A CITY-ST-2 TITLE NAME	ADORESS ZIP	ired wher			Change	☐ Addition	CR2E034 (11/98)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD RHONE, RUDY A 2140 21ST AVENUE, NORTH ST. PETERSBURG FL 33713 SD SMITH, SIEGMUND W 127 140TH AVENUE, NORTH	D DIRECTORS	13. 1.1 T 1.2 N 1.3 S 1.4 C 2.1 T 2.2 N 2.3 S	TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A	NDORESS ZIP	ired when			Change	☐ Addition	CR2E034 (11/98)
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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 tectiver or trusted impowered 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 a same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the attachment with a same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the same legal effect as if made under coath; that I am an officer or director of the corporation or the tective or trusted in the same legal effect as if made under coath in the same legal effect as if made under coath in the same legal effect as if made under coath in the same legal effect as if made under coath in the same legal effect as if made under coath in the same legal effect as if made under coath in the same legal effect

SIGNATURE:

SIGNATURE AND TYPED OF CRUITED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #