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

Mailing Address
15231 GULF BLVD

MADEIRA BEACH FL 33708-1814

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

**SIGNATURE:** 

15231 GULF BLVD MADEIRA BEACH FL 33708



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Feb 14 1997 8:00am

Secretary of State

Secretary of state 

DIVISION OF CORPORATIONS

## DOCUMENT # P96000041437 (0)

## DOIRON DEVELOPMENT CORP.

								3. Date Incorporated or Qualified 05/09/1996	3a. D	ate of Last R	eport
2. Principal Place of Business			28. Mailing Address					4. FEI Number		Ar	plied For
21			26					59-338 14 a 7 Not Applic			ot Applicable
Surte, Apt. #, etc			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 Fee Re	Additional equired
City & State				City & State				6. Election Campaign Financing		\$5.00	Mey Re
:3					Trust Fund Contribution Added to Fees						
Zip Country				Zip C			,	8. This corporation has liability for intangible tax under s. 199.032,			
4	25 29 3					30		Florida Statutes Yes No			
9	9. Name and Address	of Current Re	gist	ered Agent				10. Name and Address of New Re	gistered	Agent	
DOIRON	i, gloria f					81	Name				
15231 GULF BLVD MADEIRA BEACH FL 33708						82 Street Address (P.O. Box Number is Not Acceptable)					
						•••	Direct Addi	ress (1.0. box Humber is Not Accepted	10)		
	.,					83	***************************************				
•											<u>.</u>
						84	City		FL	<b>85</b> Zip	Code
office of regist agent I am fa SIGNATURE	stered agent, or both, in amiliar with, and accept about typed or proceduration of	n the State of F I the obligation	lorid is of,	a. Such change was a Section 607.0505, Flo	authorize orida Sta	d by tutes	the corporat	poration submits this statement for the p tion's board of directors. I hereby accep red when relinstating)	ot the app	pointment as	registered
12.		ICERS AND DI			13.	u nye	on signatura reçon	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	2S IN 12
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NAME					6.2 N						
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CITY-ST-ZIP					6.4 C	TY-S	T-ZIP			······································	
information inc I am an office	ernly mactne information dicated on this annual er or director of the corp lack 12 or Block 13 if c	on supplied wit report or suppl poration or the banged, or on	in thi leme rece	s filing does not qualif intal annual report is tr iver or trustee ompower tachment with an add	y for the rue and ered of	exe acou	ate and that cute this repor	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 607, Florida S	s. I furihe l effect a tatutes; a	ir certify that s if made un and that my r	the der oath; that name