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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000047600 (7)

DOUG MONTOOTH, INC.

MONTOOTH, DOUGLAS 1672 NE 36TH ST

OAKLAND PARK FL 33334

Principal Place of Business

1672 NE 36TH ST
OAKLAND PARK FL 33334

2. Principal Place of Business

2. Mailing Address

2. Mailing Address

g. Name and Address of Current Registered Agent

FILED Apr 17 1998 8:00am Secretary of State



	DO NOT WRITE IN THIS SPACE							
	3.	Date Incorporated or Qualified 05/30/1996						
	4. FEI Number 65-0689812				Applied For			
					Not Applicable			
	5.	Certificate of Status Desired		·	75 Additional e Required			
	6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees				
	8.	ar Intangible ☑ No						
	10.	Name and Address of New Re	egistere	d Agent				
dre	ss (P	O. Box Number is Not Accepta	bie)					

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, 1 am (amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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64 City

Name

Street Ad

ayen. i c	an teminal with, and accept the obligations of, se	CHOILOGU.COOC, LIC	onda Siaidies.			
SIGNATURE	Signature, typed or printed name of registered agent and title if app	NoTicable (NOT	F: Registered Agent signature required	when rainstating)	DATE	
12.	OFFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	S IN 12
TITLE	DPS	DELETE	1.1 TITLE		Change	Addition
NAME	MONTOOTH, DOUGLAS		1.2 NAME			
STREET ADDRESS	1672 NE 36TH ST		1.3 STREET ADDRESS			
CITY-ST-ZIP	OAKLAND PARK FL 33334		1.4 CITY-ST-ZIP			
TITLE		DELETE	2.1 TITLE		Change Change	Addition
NAME			2.2 NAME			
STREET ADDRESS	İ		2.3 STREE1 ADDRESS			
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE		☐ Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP	;		3.4. CITY - ST - ZiP			
TITLE		☐ DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP	<u> </u>	- <u></u>	4.4 CITY - S1 - ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE	T	DELETE	6.1 TITLE		☐ Change	Addition
NAME	<u> </u>		6.2 NAME			
STREET ADDRESS	;		6.3 STREET ADDRESS			

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.

6.4 CITY-ST-ZIP

CR2E034 (10/97)

Zip Code