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

**PROFIT** CORPORATION ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT # P96000047960 (5)

DISTINGUISHED DESIGNS AND ENGINEERING, INC.

**FILED** Apr 29 1998 8:00am Secretary of State



				_				
Principal Place of Business Mailing Address						r ngarisat tin libita attit gatit gatit gatit gatit gifti	( IMBIN INCID DE	iri Bali išši
626 & LAKEMONT AVE WINTER PARK FL 32792		626 S LAKEMONT AVE WINTER PARK FL 32792			DO NOT WRITE IN THIS S	SPACE		
						3. Date Incorporated or Qualified		
						06/03/1996		
2. Principal P	2a. Mailing Address	Vailing Address			4. FEI Number	Ai	pplied For	
21		26	26			59-3389514	N/	ot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				\$8.75	Additional
22		27	7			5. Certificate of Status Desired	Fee Re	equired
City & State	0	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be
23		28				Trust Fund Contribution		to Fees
Zip	Country	Zip	Country			8. This corporation owes or has paid the cur		
24	25	29	30					J No
	9. Name and Address of Curr	ent Registered Agent		B1	Name	10. Name and Address of New Registered	Agent	
	ORHEAD, TIMOTHY R			51	Name			ļ
145 N MAGNOLIA AVE				82	Street Addre	ess (P.O. Box Number is Not Acceptable)		
ORLANDO FL FL328-01								
				83				-
				84	City		85 Zip (	Code
					-	<u> </u>	.	
11. Pursuant I office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	i02 and 607.1508, Florida Statul le of Florida. Such change was i dations of Section 607.0505. Fl	es, the at authorized orida Stat	oove d by	-named corpo the corporation	oration submits this statement for the purpose of on's board of directors. I hereby accept the app	changing it ointment as	ts registered registered
•	The state of the s	gaments in, poetien per locae, in		0.00	•			
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable [NOT	E Registered	d Ager	ol signature required	d when reinstating) DATE		[,
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	RS IN 12
TITLE	DPST	DELETE	1.1 TO	TLE			Change	☐ Addition
NAME	VERMILIO, RODNEY R		1.2 N	ME	1			
STREET ADDRESS	626 S LAKEMONT AVE		1.3 \$7	REET	ADDRESS			
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 Ct	1.4 CITY-ST-ZIP				
TITLE	DV DELETE 2		2.1 10	ſĻĘ			☐ Change	Addition
NAME	EHLERS, KENINETH H		2.2 N	2.2 NAME				į
STREET ADDRESS			2.3 STREET ADDRESS		address			
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714			2.4 C	2.4 CITY - ST-ZIP				
TITLE		☐ DELETE	3 1 717	ILE		<del></del>	Change	Addition
NAME			3.2 NA	ME	į.			Į
STREET ADDRESS			3 3 ST	REET	ADDRESS			
CITY-ST-ZIP			34. C	TY-S	T - ZIP			
TITLE		DELETE	4.1 Til	TLE			Change	Addition
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 ST	REET	ADDRESS .			ļ
CITY-S1-ZIP			4.4 CI	TY-ST	- ZIP			
TITLE		☐ DELETE	5.1 711	ILE			Change	Addition
NAME			5.2 NA	ME				
STREET ADDRESS			5.3 ST	REET	ADDRESS			
CITY-ST-ZIP			5.4 CII	TY-ST	ZIP			
TITLE		DELETE	6.1 Til	ILE			Change	Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 ST	REET /	address			
CITY - ST - ZIP			6.4 CI	TY-ST	- ZIP			

14. Thereby 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 suppliemental annual report is fun 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 cordulation or the receiver or trustee em severed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 v changed, or on an attachment without accuracy.