

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

FILED  
Oct 07 1998 8:00am  
Secretary of State

DOCUMENT # P96000057862 (0)

1. Corporation Name  
D.E.K. CORPORATION



Principal Place of Business

8301 JOLIET ST  
HUDSON FL 34667

Mailing Address

8301 JOLIET ST  
HUDSON FL 34667

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 11820 Seminole Dr.  
Suite, Apt. #, etc.

22 City & State  
23 New Port Richey FL

24 Zip 34654 25 Country

2a. Mailing Address

26 11820 Seminole Dr.  
Suite, Apt. #, etc.

27 City & State  
28 New Port Richey FL

29 Zip 34654 30 Country

3. Date Incorporated or Qualified

07/08/1996

4. FEI Number

APPLIED FOR 59-3446257

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

KONIG, DARRYL E  
8301 JOLIET ST  
HUDSON FL 34667

10. Name and Address of New Registered Agent

81 Name  
Koning Darryl E.  
82 Street Address (P.O. Box Number is Not Acceptable)  
11820 Seminole Dr.  
83  
84 City  
New Port Richey FL 85 Zip Code  
34654

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 *Darryl E. Koning*

(NOTE: Registered Agent signature required when reinstating)

9-28-98

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME KONIG, DARRYL E  
STREET ADDRESS 8301 JOLIET ST  
CITY-ST-ZIP HUDSON FL 34667

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP  
D  
Koning, Darryl E  
11820 Seminole Dr.  
New Port Richey FL 34654

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP  
Koning, Kevin C.  
11820 Seminole Dr.  
New Port Richey FL 34654

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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: *Darryl E. Koning*

9-28-98 812-574-225

CR2E034 (5/98)