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 **FILED**

May 14 1998 8:00am

Secretary of State

DOCUMENT #

STREET ADDRESS

CITY-ST-ZIP

P97000013456 (3)

DELASHMUTT ENTERPRISES, INCORPORATED

Principal Place of Business		Mailing Address		T LEGITE OF THE TOTAL SOUR BOTT BOTT BOTT BOTT BOTT	ELBOO TIKUL OLDOT OHIYO OHIT 1001	
54 EMERALD COURT		54 EMERALD COURT				
SATELLITE BEACH FL 32937		SATELLITE BEACH FL 32937		DO NOT WRITE IN THIS	S SPACE	
]					3. Date Incorporated or Qualified	
İ					02/04/1997	
	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26		159-59267/3	Not Applicable	
Suite, Apr. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		C, Comment of Change Country	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28	Coun		Trust Fund Contribution	Added to Fees
24	├-¬ ′	Ζφ	├ ─	ıry	8. This corporation owes or has paid the c	· ·
24	25 9. Name and Address of Current	t Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registerer	
			8	1 Name	10. Hamo and Addition of New Hogisteles	a Mant
DELASHMUTT, JOYCE E 54 EMERALD COURT						
	TELLITE BEACH FL 32937		8	2 Street Add	lress (P.O. Box Number is Not Acceptable)	
	MELLIE BEACH FE 32937		8	3		·
			_			
			0	4 City	F	L 85 Zip Code
11. Pursuant	to the provisions of Sections 607,0502	2 and 607, 1508, Florida St	atules, the abo	ve-named corp	poration submits this statement for the purpose tion's board of directors. I hereby accept the ac	of changing its registered
agent. La	egiste red agent, or both, in the State (m fam iliar with, and accept the obliga	of Florida. Such <mark>change w</mark> itions of, Section 60 7.0 505	as autnorized , Florida Statut	by the corpora es.	tion's board of directors, I hereby accept the ap	pointment as registered
SIGNATURE						
	Signature, typed or prioted name of registered agen			gont signature requ	red when reinstating) DATE	
12.	OFFICERS AND	DELETE	13. 11 BIG		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
NAME		ניין טרנכונ		İ		CHANGE CHANGING
STREET ADDRESS	DELASHMUTT, BRANTLEY D 54 EMERALD COURT		1.2 NAM			
CITY+ST-ZIP	SATELLITE BEACH FL 32937			ET ADDRESS		
TITLE	STD	☐ DELETE	1.4 CITY 2.1 TITLE			Change Addition
NAME	DELASHMUTT, JOYCE E		2.2 NAM			C change C vocation
STREET ADDRESS	54 EMERALD COURT			ET ADDRESS		
CITY-ST-ZIP	SATELLITE BEACH FL 32937			-\$1-ZIP		
TITLE	SALECTIE DENOTTIE 02007	DELETE	3.1 THLE			Change Addition
NAME			3.2 NAM			
STREET ADDRESS			8	ET ADDRESS		
CITY-ST-ZIP			3.4. CITY			
TITLE			4.1 7(TLE			Change Addition
NAME			4. 2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			4.4 CITY			ŀ
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAM			
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP			5.4 City	1		
TITLE		DELETE	61 TITLE			Change Addition
NAME			62 NAM			-

63 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 trusted 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.