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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000027521**1. Corporation Name

BENSON & BRADLEY, INC.

	Q DIADELT, INO.													
Principal Place	of Business	Mailing	Address											
1924 SOUTH 14T			UTH 14TH STREE											
FERNANDINA BEACH FL 32034			FERNANDINA BEACH FL 32034					DO NOT WRITE IN THIS SPACE						
us		US						3, Date Inc	orporated or Qua					
								03/21/						
A D4 1 101	an of Business	2a Mai	ling Address					4. FEI Num					Appli	ied For
2. Principal Pla	ace of Business	26						59-343	4262				 -	Applicable
Suite, Apt. #	t oto		te, Apt. #, etc.					= Contifort	e of Status Desi	red				ditional
_	7, GIO.	27						5. Certificat	e or Status Book				e Requ	
City & State			/ & State				-		Campaign Finat	ncing			.00 м	•
23	•	28							nd Contribution				ded to	rees
Zip	Country	Zip		Co	untry				poration owes th	e curre	ent year In	tangible		⊒No
24	25	29		30				Persona	Property Tax.	Nam D	aletoros	Yes		7140
	9. Name and Address of Currer	nt Registere	d Agent		041	- L		10. Name a	nd Address of	HEW K	e distrige	Agent	-	
					81	Na								
	SON, DARLENE L				82	Str	et Addre	ess (P.O. Box	Number is Not A	ccepta	ble)			
	ED CEDAR ROAD									· <u> </u>			4	
FERN	NANDINA BEACH FL 32034				83				1 2	1.			· . ; ; <u></u>	<u>, </u>
					84	Cit	,			-		85	Zip Co	ode
				_		1 '				 	<u> </u>	L	na ite n	egistered
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1 of Florida. S	508, Florida Stat Such change was	utes, the authorize	above ed by	e-nan the c	ned corpo orporatio	on's board of di	rectors. I hereby	y accep	t the app	ointment	as regi	istered
agent. I a	egistered agent, or both, in the State m familiar with, and accept the obliga	ations of, Sec	ction 607.0505, F	lorida Sta	atutes	3.	·	d when reinstating)			DATE			
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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, of on an attachment with an address, with all other like empowered. CITY-ST-ZIP

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

FILED

Feb 15, 1999 8:00am

Secretary of State

02-15-1999 90028 005 ***150.00