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**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 01 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name P97000029385 (6)

D & T ENTERPRISES OF LAKELAND, INC. Principal Place of Business Mailing Address 6736 CARRIAGE LANE 6736 CARRIAGE LANE LAKELAND FL 33811 LAKELAND FL 33811 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/01/1997 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30 X Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FAUBEL, DANIEL **6736 CARRIAGE LANE** 82 Street Address (P.O. Box Number is Not Acceptable) LAKELAND FL 33811 83 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE D □ DELETE 1.1 TITLE Change Addition NAME **FAUBEL, DANIEL** 1.2 NAME 6736 CARRIAGE LANE STREET ADDRESS 1.3 STREET ADDRESS LAKELAND FL 33811 CITY-ST-ZiP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE **CLOUD, TERRA** NAME 22 NAME **6736 CARRIAGE LANE** STREET ADDRESS 2.3 STREET ADDRESS LAKELAND FL 33811 CITY-ST-ZIP 2.4 CHTY-ST-ZIP DELETE Addition TITLE 3.1 TITLE ☐ Change 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELFTE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - 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 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. (941) 701-9197