**FILED** FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** Apr 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DOCUMENT # 1. Corporation Name P9700005923 JAN 05 1998 DARVANHALL INC. Principal Place of Business Mailing Address C/O GULF TAX INC. BRIAN LIGHT C/O GULF TAX INC. BRIAN LIGHT 6860 GULFPORT BLVD SUITE 900 6860 GULFPORT BLVD SUITE 900 DO NOT WRITE IN THIS SPACE ST PETERSBURG FL 33707-2108 ST PETERSBURG FL 33707-2108 3. Date Incorporated or Qualified 07/07/1997 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 36 416B0B7 COACH + HORSES BRITISH PUB 26 Not Applicable Suite. Apt. #. etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired 4921 CORTEZ RA W Fee Regulred 27 City & State BRAD はんくつん City & State 6. Election Campaign Financing \$5.00 May Be £ 1 28 Trust Fund Contribution Added to Fees Country Zφ Country 8. This corporation owes or has paid the current year Intangible MAJATEL **ኤ**Կጊ ነዕ Personal Property Tax due June 30. 25 Yes Yes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GULF TAX INC** C/O BRIAN LIGHT 82 Street Address (P.O. Box Number is Not Acceptable) 6860 GULFPORT BLD SUITE 900 83 ST PETERSBURG FL 33707-2108 84 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, typind or printed name of registered agont and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12, DELETE Change Addition 1.1 TITLE TITLE VANDER VELL, MARTIN C 1.2 NAME NAME 6860 GULFPORT BLVD SUITE 900 1.3 STREET ADDRESS STREET ADDRESS \$T PETERSBURG FL 33707-2108 1.4 CITY-ST-ZIP CITY-ST-ZIP \_\_\_ Addition DELETE Change 2.1 TITLE TITLE DARE, BARRY K 2.2 NAME NAME 6860 GULFPORT BLVD SUITE 900 2.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL 33707-2108 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change **▼** Addition 56 C TITLE 3.1 TITLE BRIAH LIGHT - GULF TAX INC 3.2 NAME NAME 6860 GULFPORT BLYD, STE 900 STREET ADDRESS 3.3 STREET ADDRESS 33707-2108 51 PENERSBURG F١ 3.4 CITY-ST-ZIP CITY-ST-ZIP Change DELETE Addition 4.1 TITLE TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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.

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