## FILE NOW: FILING FEE AFTER MAY 1ST IS \$5 50.00

FLORIDA DEPARTMENT

**PROFIT** 

SIGNATURE:

Jun 05 1998 8:00am CORPORATION ANNUAL REPORT Sandra B. Mort Secretary of State Secretary of St DIVISION OF CORPO ATIONS · 1998 DOCUMENT #
1. Corporation Name P97000060602 (4) DAYA, INC. Principal Place of Business Mailing Address 521 74TH ST. 521 74TH ST. HOLMES BEACH FL 34217 HOLMES BEACH FL 34217 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/23/1997 2a. Mailing Address 2. Principal Place of Business Applied For 26 21 Not Applicable Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired 27 Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country ntry B. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent BELSITO, JOHN E 521 74TH ST. Street Address (P.O. Box Number is Not Acceptable) HOLMES BEACH FL 34217 83 84 City 85 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 Horida. 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 tame of regularization agost and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13 DELETE Change Addition TITLE 1.1 TITLE Hesident 1.2 NAME NAME John 1.3 STREET ADDRESS STREET ADDRESS 30 JOH DELETE 1.4 CITY - ST- ZIP CITY-ST-ZIP Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - 71P COY-ST-7/P DELETE Addition TITLE 3 1 TITLE Change NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 1 ILE Change Addition TITLE 900002551529 4. 2 NAME -06/08/98--01080--0**4**0 STREET ADDRESS 4.3 STREET ADDRESS \*\*\*150.00 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Chano 5.1 TITLE TITLE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP TITLE □ DELETE 61 TITLE ☐ Change NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 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 suppliemental 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 by an attachment with an address.

**FILED** 

941-961-0641