FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

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DATAGOLD, INC.

		<u> </u>	<u></u>				
Principal Place of Business Mailing Address 2501 SOUTH BUMBY AVE 2501 SOUTH BUMBY AVE ORLANDO FL 32806 ORLANDO FL 32806				1 105 1145 114 1241) (401) 401(1 801) 601(1 601) 611(1 611) 611(1 611) 611(1 611)			
					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					07/16/1997		
2. Principal P	lace of Business	2a. Mailing Addres	s		4. FEI Number Applied For		
21		26	_		59-3457611 Not Applicab		
Suite, Apt.	#, etc.	Suite, Apt. #, el	ic.		SR 75 Additional		
22		27			5. Certificate of Status Desired Fee Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Cour	try	8. This corporation owes or has paid the current year Intangible		
24	25	29	30		Personal Property Tax due June 30. 🔲 Yes 📈 No		
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent		
	OGINS, DNIEL J		'	Name	ımê		
2501 \$O UTH BUMBY AVE			ļī.	Stree	t Address (P.O. Box Number is Not Acceptable)		
ORLANDO FL 32806							
			}'	3			
			la la	4 City	y 85 Zip Code		
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida	Statutes, the above authorized	ove-name	med corporation submits this statement for the purpose of changing its registere corporation's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.05	i05, Florida Statu	tes	corporation a board of directors. Thoroby accept the appointment as registered		
SIGNATURE	_						
	Signature, typed or printed name of registered rigin			Agent signatu	nature required when reinstating) DATE		
12.		ID DIRECTORS DELE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	POSTAL DILLA ALA	[] DELE			P/D Li Change Li Additio		
NAME	RECRONG BILLY XI X		1.2 NAM		Cecil E Boozer		
STREET ADDRESS	BSB KSOUTH BUMBY AVEX			ET ADDRESS	Lagor D Dumby Avenue		
CITY-ST-ZIP	ABLANDONFK REESEX	Drue		- \$1 - ZIP	······································		
TITLE	OCCUPIO DENIATE D	☐ DELE			L_ Change L_ Additio		
NAME	GOOGINS, RENATE B		2.2 NAM				
STREET ADDRESS	2501 SOUTH BUMBY AVE			E1 ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32806	Det		r - ST - ZIP			
TITLE	T Carolyn Barton	☐ DELE			Change Addition		
NAME .	2501 S Bumby Av	enue	3.2 NAN				
STREET ADDRESS		806	1	F1 ADDRESS			
CITY-ST-ZIP				r-ST-ZIP			
TITLE		DELE			Change Additio		
NAME			4. 2 NA				
STREET ADDRESS			4.3 STR	EET ADDRESS	ESS		
CITY-ST-ZIP		T neve		- \$1- ZIP			
TITLE		☐ DELE			Change Additio		
NAME			5.2 NAM				
STREET ADDRESS			5.3 STA	et address	ESS		
CITY-ST-ZIP				-ST-ZIP			
TITLE		L DELE			Change Addition		
NAME			6.2 NAM	E			
STREET ADORESS			6.3 STR	FT ADDRESS	ESS		

64 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 of trustee empowered as 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 appear and the statutes.