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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000066604 (4)

D.B.I.L.P., INC.

FILED Apr 28 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								
, ,								
5533 CENTRAL AVE. 5533 CENTRAL AVE. ST. PETERSBURG FL 33710 ST. PETERSBURG FL 33710						,		
SI, PETENGBONG TE SOTTO			OI. 1 E10	SI. PETENSBURG PE SOFTO			DO NOT WRITE IN THIS SPACE	
								3. Date Incorporated or Qualified
								08/01/1997
2.	Principal P	lace of Busin	iess	2a. Mailin	g Address			4 FEI Number /// YC 7 3 Applied For
21				26				59-3468572 Applied For Not Applicable
匚	Suite, Apt. #, etc.			Suite,	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
22				27				Fee Required
├	City & State	ity & State			City & State			6. Election Campaign Financing \$5.00 May Be
23	Zip	28				Ca inte		Trust Fund Contribution Added to Fees
24	ZIP		Country	Zip	<u> </u>	Country	′	8. This corporation owes or has paid the current year intaggible
[24]	·		25 and Address of Curren	29 t Registered A	3	0]		Personal Property Tax due June 30. L. Yes 2000 10. Name and Address of New Registered Agent
\vdash			·	t Hogistored A	·gon	81	Name	
		EW, RANDA				82		
5533 CENTRAL AVE. St. Petersburg FL 33710								et Address (P.O. Box Number is Not Acceptable)
]						83		
l						84	City	FL 85 Zip Code
11 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-pament corporation submitte this statement for the purpose of changing its region								ed cornoration 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 princed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) DATE								
12	l		OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
זוז	LE	D			DELETE	1.1 TITLE		SCCRe TARY Change MAddition
NA	ME	DREW, I	randall W			1.2 NAME		
STI	REET ADORESS	5533 CE	intral ave.			1.3 STREET	ADDRESS	s
cn	Y+ST-ZIP	ST. PET	ERSBURG FL 33710			1.4 CITY-S	it - ZIP	
TIT	LE	D			DELETE	2.1 TITLE		Change Addition
NA	ME		in, william			2.2 NAME		
ST	REET ADDRESS		8th ave., n.			23 STREET	ADDRESS	s
Cn	Y-ST-ZIP	CLEARY	ATER FL 34622			2.4 CITY-	ST-ZIP	
TIT	LE	D			DELETE	3.1 TITLE		V.P. Change Addition
NA	ME		n, diana m			3.2 NAME		
STI	reet address		TH AVE. NW			3.3 STREET	ADDRESS	2
Cit	Y-ST-ZIP	BRADEN	TON FL 34209			3.4. CITY-	ST-ZIP	
Tπ	LE				DELETE	4.1 TITLE	_	Change Addition
NA	ME					4. 2 NAME		
STI	REET ADDRESS					4.3 STREET	ADDRESS	s
CIT	Y-ST-ZIP					4.4 CITY - S	T-21P	
TIT	TE J				DELETE	5.1 TITLE		Change Addition
NA	ME					5.2 NAME		
STI	REET ADDRESS					5.3 STREET	ADDRESS	\$
CIT	Y-ST-ZIP					5.4 CITY-S	T-7/P	
TIT	LE				DELETE	6.1 TITLE		☐ Change ☐ Addition
NA	ME					6.2 NAME		
STI	REET ADORESS					6.3 STREET	ADDRESS	s
Art	Y-ST-ZIP					6.4 CITY - S	1-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 fue 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, on an application of the receiver of trustee empowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

4-21-98

(813) 347-4909