Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90023 024 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000067321

1. Corporation Name

DAY ADEA LIET SEDVICE INC

DAT NÜC	W CILL SEUVICE 1140.											
Principal Place	e of Business	М	ailing Address						Ditt Bütti Affirm A	*********	11118 118	## 14#1 P##1
3773 CENTRAL AVE STE C014 ST PETERSBURG FL 33713 US 3773 CENTRAL AVE STE C014 ST PETERSBURG FL 33713 US					ı [*]			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 08/01/1997				
2 Principal Pi	lace of Business	22	, Mailing Address				-	4. FEI Number			Appli	ed For
21		26	g /					59-3465328		-	Not /	Applicable
Suite, Apt.	# etc.	1201	Suite, Apt, #, etc.		-					\$8.7	75 Ad	ditional
22		27	. , ,				- 1	5. Certificate of Status Desired		Fe	e Requ	ured
City & State	82.22.22.22.22.2		City & State					.6. Election Campaign Financing		\$5	00 м	ay Be
23		28					-3	Trust Fund Contribution			ded to	
Zip	Country Zip			Country				8. This corporation owes the cu	rent year Inta		•	_
24	25	29	3	0				Personal Property Tax.		Yes	- X	No
	9. Name and Address of Curre	nt Regis	stered Agent		2.71		-	10. Name and Address of New	Registered /	Agent		
14/ILEF			÷		81	Name						ļ
	BRENNER, J M				82	Street A	ddress	s (P.O. Box Number is Not Accep	table)			
3773 CENTRAL AVE STE C014												
51 P	ETERSBURG FL 33713-8338				83							
					84	City				85	Zip Co	de
						•			<u> </u>			
office or n agent. I a	to the provisions of Sections 607.05t egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	da. Suich change was suitt	ากกรอด	l hw	the comor:	orpora ation's	tion submits this statement for the s board of directors. I hereby acce	e purpose of ept the appoin	changin itment a	g its re is regis	gistered stered
SIGNATURE	Signature, typed or printed name of registered age	ent and title	if applicable. (NOTE: R	egistered	Agen	t signature req	quired wh	nen reinstating)	DATE			
12.	OFFICERS AI	ND DIRE		13.				ADDITIONS/CHANGES TO O	FFICERS AN			
TITLE	PD		☐ DELETE	1.1 111	ſŒ					☐ Cha	nge	Addition
NAME	WEAVER, ROGER K			1.2 NA	ME							ļ
STREET ADDRESS	5908 6 AVE SOUTH			1.3 ST	REET	ADDRESS						
CITY-ST-ZIP	ST PETERSBURG FL 33707			1.4 CF	TY-ST	r-zip			·			
TITLE			☐ DELETE	2.1 TII	rle					☐ Cha	nge	Addition
NAME	•			2.2 N	AME.	1						
STREET ADDRESS				2.3 \$1	REET	ADDRESS						
CITY-ST-ZIP				2.4 C	ΠY-\$	T-ZIP			<u></u>			
TITLE			☐ DELETE	3.1 ₹∏	īLΕ			-	-	☐ Cha	.nge	☐ Addition ·
NAME				3.2 NA	ME							
STREET ADDRESS:				3.3 ST	REET	ADDRESS						ļ
CITY-ST-ZIP				3.4. CI	TY-S	T-ZIP						
TITLE			☐ DELETE	4.1 TI	TLE					☐ Cha	.nge	Addition
NAME	• •			4. 2 N	AME							
STREET ADDRESS				4.3 ST	REET	ADDRESS						ł
CITY-ST-ZIP	•			4.4 CF	TY-S1	r-zip						
TITLE			☐ DELETE	5.1 TI	N.E.					☐ Cha	ınge	Addition

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 an attachment with an address, with all other like empowered.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

NAME

πLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

ROGER K WEAVER

DELETE

3/29/99

727/327-1202

☐ Change

☐ Addition