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

CORPORATION ANNUAL REPORT

1998

23



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000077297 (4)

DAZEY COMMUNICATION, INC.

AMERILAWYER CHARTERED 343 ALMERIA AVENUE

CORAL GABLES FL 33134

Principal Place of Business	Mailing Address	1 10911091 110 10111 10311 03111 04111 04111 05111 19	21: 14914 11414 14(I) 1631 1831
1445 WEST BUSCH BLVD TAMPA FL 33612	1445 WEST BUSCH BLVD TAMPA FL 33612	DO NOT WRITE IN THIS SPACE	
		3. Date Incorporated or Qualified	
		09/08/1997	
2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied Fo
21	26	593466742	Not Applic
Sulte, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additions

City & State City & State 6. Election Campaign Financing Trust Fund Contribution 28

Zip Country Zψ Country 30 29 9. Name and Address of Current Registered Agent

Personal Property Tax due June 30. X Yes 10. Name and Address of New Registered Agent Name Street Address (P.O.

83 84 City

81

8. This corporation owes or has paid the current year Intangible

FILED

Apr 15 1998 8:00am

Secretary of State

Applied For Not Applicable

Fee Required

\$5.00 May Be

Added to Fees

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change agent. I am familiar with, and accept the obligations of, Section 607.65 utes

nove-named corporation submits his statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered

SIGNATURE Signature, typed or printed number of regd Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change ___ Addition TITLE PSTD 1.1 1111.6 HANAST, DAISY NAME 1.2 NAME 1445 WEST BUSCH BLVD STREET ADDRESS 1.3 STREET ADDRESS **TAMPA FL 33612** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 THILE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 61 TITLE 6.2 NAME 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 slated 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.

4- 5. US

DIA MAN 6 2211