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 # P9800042657

1. Corporation Name

DE IAV MEMORIAIS INC

Apr 05, 1999 8:00 am Secretary of State

04-05-1999 90019 046 ***150.00

DEJAT N	ALIVIONIALS, INC.								
Principal Place	e of Business	Mailing Addre					BI DI 18111 DANIS DAISS DAISS AN	isti Afilia tibin Biini n	\$11 10 0 \$ 1001
7131 SOUTH COUNTYLINE ROAD 7131 SOUTH COUNTYLINE			COUNTYLINE RO	AD					
PLANT CITY FL 33567 PLANT CITY FL 33567				-			DO NOT WRITE IN TH	HIS SPACE	
						3. Date Incorporate	d or Qualifed		
ı						05/12/1998			}
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FFI Number		App	lied For
21		26				59-35	12141	Not	Applicable
Suite, Apt.	#. etc.	Suite, Apt	i. #, etc.			5. Certifcate of Stat		\$8.75 A	ditional
22		27				5. Certificate of State	us Desired	Fee Rec	uired
	Burner of the second se		ate	<u></u> -		6. Election Campai	gn Financing	\$5.00	lay Be
23		28		_		Trust Fund Contr	ribution	Added to	Fees
Zip	· Country	Zip		Country		8. This corporation	owes the current year	Intangible	1.
24	25	29	30			Personal Propert	<u></u>		No
	9. Name and Address of Current	t Registered Age	nt			10. Name and Addr	ess of New Register	ed Agent	
				81	Name	u Ann Jen	Kins _		
	RILAWYER			82	Street Addr	ess (P.O. Box Number i	is Not Acceptable).	1	and
1	ALMERIA AVENUE				713	31 SOUTH	COUNTY	LINE K	UNU
COR	VAL GABLES FL 33134			83		-	,		
				84	City D/	DOLT CIT	1/ 0	85 Zip C	20/17
					12		yr	of changing its	enistered
i office or r	to the provisions of Sections 607.0502 registered agent, or both, in the State of	of Florida. Such et	bande was autho	orizea ov	the corporation	on's board of directors. I	hereby accept the ap	pointment as reg	istered
agent. I a	im familiar with, and accept the obligat	tions of, Section 6	07.0505, Florida	Statutes		. 10 1	La	1100	
SIGNATURE	Dian Gen	kins	LuAnt	\\\/E	NKING	s - presidi	ent 3/	10/77	}
	Signature, typed or printed name of registered agent	D DIRECTORS	(NOTE: Reg	13.	it signature require	d when reinstating) ADDITIONS/CHA	NGES TO OFFICERS	AND DIRECTOR	RS IN 12
TITLE	PT OFFICERS AN		DELETE	1.1 TITLE				☐ Change	☐ Addition
\	\	_		1.2 NAME					
NAME	JENKINS, LU A 7131 SOUTH COUNTYLINE RO	AD		1.3 STREET	T ADDDESS				
STREET ADORESS		AU		1.4 CITY-S					
CITY-ST-ZIP	PLANT CITY FL 33567	Г		2.1 TITLE	1-211			☐ Change	Addition
TITLE	V IENIKINIO III A	L,	") DECETE	2.7 MAME				_ •	
NAME	JENKINS, LU A	AD							
STREET ADDRESS	,	AU	⁶ 4	2.3 STREET	.				
CITY-ST-ZIP	PLANT CITY FL 33567			2. 4 CITY- 9	ST-ZIP				{
TITLE	} SD) UELETE =	2 4 7mm =			·	Change	Addition
NAME	WIFE THE COLUMN TO THE THE THE	∟ متب ۱۰ تا بہ حد ۸۰۰	DELETE	3.1 TITLE	٠٠٠ - ١٠٠٠	and the same of th	more ordinary on the	Change	Addition
STREET ADDRESS	JENKINS, DAVID R	يتياه ۽ ساميام .	_ DELETE مریخی کا در خص	3.2 NAME	٠٠٠		more a market of the	Change	Addition
	7131 SOUTH COUNTYLINE RO	يتياه ۽ ساميام .	_] DELETE	3.2 NAME 3.3 STREET	T ADDRESS	المعادي والمتاريخين المعادية	er sie distribute de l'im	Change	Addition
CITY-ST-ZIP		AD	ما در تی مر	3.2 NAME 3.3 STREET 3.4. CITY- 9	T ADDRESS	موسوري ويشون فيسود برجه الموسود	who have a management of the	- regus regions d'un	
CITY-ST-ZIP	7131 SOUTH COUNTYLINE RO	AD	DELETE	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE	T ADDRESS	and the second s	المراجعة والمشاهدة والمراجعة والمراج	Change	Addition Addition
TITLE NAME	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	ما در تی مر	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE 4. 2 NAME	T ADDRESS IT-ZIP		we you a residence on the	- regus regions d'un	
TITLE NAME STREET ADDRESS	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	ما در تی مر	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	T ADDRESS		Morrow & Millioning St. 1989	- regus regions d'un	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE	3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	T ADDRESS		Maryon & Millioning St. 1989	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	ما در تی مر	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE	T ADDRESS		Maryon & Millioning St. 1989	- regus regions d'un	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS T-ZIP T ADDRESS T-ZIP		who a material as the	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE	3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET	T ADDRESS T-ZIP T ADDRESS T-ZIP		who are a statements on the	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE DELETE	3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	T ADDRESS T-ZIP T ADDRESS T-ZIP		was a talenda da in	☐ Change	Addition Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE	3.2 NAME 3.3 STREET 3.4. CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	T ADDRESS T-ZIP T ADDRESS T-ZIP		we see a military dr	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	7131 SOUTH COUNTYLINE RO PLANT CITY FL 33567	AD	DELETE DELETE	3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	T ADDRESS T-ZIP T ADDRESS T-ZIP T ADDRESS T-ZIP		we see a military dis	☐ Change	Addition 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 of 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 in on an attaining with an address, with all other like empowered.

SIGNATURE: