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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 P98000051501 DOCUMENT #

Dixieland Enterprises, Inc.

Principal Place of Business 2881 East Oakland Park Blud Some

Sutt. 100

FILED May 06, 1999 8:00 am **Secretary of State**

05-06-1999 90018 034 ***150.00

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Fortdandedale FL 3332 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed June q, 1998 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 27 62.78 N Federal H 26 6278 N. Federal Not Applicable Suite, Apt. #, etc. \$8.75 Additional # 140 5. Certificate of Status Desired Fee Required City & State City & State
Fort Landerdole 6. Election Campaign Financing \$5.00 May Be Fort L 28 Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible Broward 301 Braward Personal Property Tax. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Tamela J. Stults, Esquire 2881 East Oakland Park Blid. Duncar Swite 100 Fort Lauderdale, FL 33306 Zip Code 33308 T Lauderdalo 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation 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. Hugh Duncan, President SIGNATURE 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TAMELAJ, STULTS, ESQUIR DOLLETE FRITAL DIRECTO / 2801 E. Oalchal Park Pold # 100 TITLE Mugh Duncan, President 6278 N Federal Huy. # 1.1 TITLE NAME 12 NAME STREET ADDRESS Gut Laudendale, Silorida 1.3 STREET ADDRESS Jort Landerdale, Horida City-St-zie 1 4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP TITLE ☐ DELETE 3.1 TITLE Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE ☐ Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE ☐ DELETE 61 TITLE ☐ Change Addition NAME 62 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 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 an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (11/98)