## **PROFIT** CORPORATION ANNUAL REPORT 1000



FLORIDA DEPARTMENT GF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## FILED Apr 09, 1999 8:00 am Secretary of State 04-09-1999 90018 031 \*\*\*150.00

DOCUMENT # P9800	0068456				
DMBC, INC.					
Principal Place of Business	Mailing Address		I )9994990 450 INION YOUN OONIN 90414 BAHN OONIN	O DANGA MENIE DIETE EL	AL CITY FIRE
927 HICKORY ST. P. C. BOX 160158 ALTAMONTE SPRINGS FL 32701 ALTAMONTE SPRINGS FL 327			-59-35	52 931	11
		716-0158	DO NOT WRITE IN THIS SPACE		
			3. Date Incorporated or Qualified		
			07/30/1998		Į.
2. Principal Place of Business	2a. Malling Address		4. FEI Number	Арр	lied For
<u> </u>	26		Applied For		Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Ad Fee Req	
2	City & State		8 Section Compaign Financing	\$5.00 A	
City & State	28	<del></del>	6. Election Campaign Financing Trust Fund Contribution	Added to	
Zip Country	Zip	Country	8. This corporation owes the current year h	ntanglisle	
4 25	29 3		Personal Property Tax.		No
9. Name and Address of Cus	ment Registered Agent	-   -	10. Name and Address of New Registered	d Agent	
MCHENRY, RICHARD J SR.		81 Name			
927 HICKORY ST.		82 Street Addr	ress (P.O. Box Number is Not Acceptable)		1
ALTAMONTE SPRINGS FL 32701		83			
				Tast Zin Co	
		<b>84</b>   City	· F	. 85 Zip Co	oge
Pursuant to the provisions of Sections 607.     office or registered agent, or both, in the Stagent. I am familiar with, and accept the ob-	0502 and 607.1508, Florida Statutes ate of Florida. Such change was aut iligations of, Section 607.0505, Florid	s, the above-named corporation the corporation of t			egistered stered
SIGNATURE Signature, typed or printed name of registered	egent and title if applicable. (NOTE: R	Registered Agent signature require	oriation submits this statement for the purpose on's board of directors: I hereby accept the app	of charging its re continent as regi	
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