OCUMENT # SO5985       (4)         D & A ASSOCIATES INC.       Image Address         Corput Process       Image Address         S 3 3 5 T       Image Address         S 3 5 T       Image Address         S 3 6 T       Image Address         S 2 M 4 first Address       Image Address Address         S 2 M 4 first Address       Image Address Address         S 2 M 4 first Address       Image Address Address Address         S 1 M 4 first Address Address	COR ANNL	PROFIT RPORATION JAL REPORT <b>1997</b>			Sandra Secreta	RTMENT OF STATE B. Mortham ary of State CORPORATIONS		1997 8 etary of	
Part of Automates				5	( <b>4)</b>				
Interpret Process     2a.     Maining Addross     4.     FE Humber     Applicable       wold, Acid #, c.K.     2a.     Suito. April #, dot.     55.00     Maining Addross     4.     FE Humber     Applicable       wold, Acid #, c.K.     2a.     Suito. April #, dot.     55.00     Maining Addross     55.00     Maining Addross       wold, Acid #, c.K.     2a.     Suito. April #, dot.     5.     Certificate of Statute Destined     76.     55.00     Maining Addross       wold, April #, c.K.     2a.     Country     8.     Certificate of Statute Destined     76.     65.00     Maining Addross       wold, April #, c.K.     2a.     2a.     Dot     Country     8.     Certificate of Statute Destined     Statute Destined Destined     Statute Destined Des	S 39 ST			2306 S	39 ST	6		IIII ULULI OLULI OLULI OLULI OLU	
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Able Apt # ckc  State	miqipai m	ace of business			lling Address				
Chy & State City &	Surte, Apl	#, elc.		Sui	te, Apt #, etc.	<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		<b>\$8.75</b>	Additional
App         Country         Zp         Country         8. This counters is lability for interruptible tax under is. 199.032, Provide Statutes         Mon         199.032, Provide Statutes         Mon           By Name and Address of Current Registered Agent         EX. Name and Address of New Registered Agent         EX. Name and Address of New Registered Agent         EX. Name and Address of New Registered Agent           RichARDS, ARINDA K.         2206 S 39 ST FT PIERCE FL 34981         51         Name         Street Address (P.O. Box Number is Not Acceptable)           83         53         54         54         Street Address (P.O. Box Number is Not Acceptable)         53           94         Cory registered agent or both, in the State of Fonds. Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Fonds. Statutes the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Fonds. Statutes the above-named corporation submits this statement for the purpose of changing its registered agent or both, in the State of Fonds. Statutes the above named corporation submits the statement for the purpose of changing its registered agent or both, in the State of Fonds. State 1007 (SSC, Fords Statutes.           NAUHH         Corr Acceptable         Total Carps Amil Diffe Croits         13.         ADDITIONSCHANGES TO OFFICERS AND DIFFECTORS IN 12           NAUHH         Corr Acceptable         Total Carps Amil Diffe Croits         13.         ADDITIONSCH	City & State	6		City	y & State	*********		\$5.0	0 May Be
	lip		ountry	Zip	· · · · · · · · · · · · · · · · · · ·		8. This corporation has liability to	or intangible tax under	
	.,	9. Name and /	ddress of Curre	nt Registere	d Agent	30			
P     Bit Charbos     Control Control     Contro     Control     Control<			К.			81 Name			
Bit Present to the provisions of Sections 607.0502 and 607 1506. Forica Statutes, the above named corporation submits this statement for the purpose of changing its registered agent on both in the State of Forica. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on both in the State of Forica. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of the change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent on the change of			ſ			82 Street Add	dress (P.O. Box Number is Not Accept	able)	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the pursuant of both in the State of Florida, Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent or both in the State of Florida, Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent or both in the State of Florida, Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent or both in the State of Florida, Statutes, the above named corporation's board of directors. I hereby accept the appointment as registered agent or both in the State of Florida, Statutes, and accept the obligations of Section 607.0505, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligations of Section 607.0507, Florida Statutes, and accept the obligation 607.0507, Flo	r i r		1				·····		
Pursuant to the provisions of Sections 607.0502 and 807.1508, Fronda Statutes, the above-named corporation submits this statement for the pursues of changing its registered agent or both, in the State of Fionda, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or both, in the State of Fionda, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or both, in the State of Fionda, Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent or both, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligations of Section 607.0505, Fionda Statutes, and accept the obligation of Section 607.0505, Fionda Statutes, and accept the obligation of Section 607.0505, Fionda Statutes, and accept the obligation of Section 607.0505, Fionda Statutes, and accept the obligation of Section 607.0505, Fionda Statute						83			
Collect of registered agent, or holly, in the State of Fiorda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent an interval with an of accept the claims of neutrod agent controls.  NATURE  Signature fuent of registered agent controls of neutrod agent controls.  NATURE  COLLECE AND DIRECTORS  I. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  COLLECE AND DIRECTORS  COLLECE ADDRESS  SI 20  COLLECE ADDRESS  SI								<b>85</b> Zij	Code
Reprinter Laper during from provide agent and the directed agent and the directed agent age	Pursuant t	to the provisions o	1 Sections 607.05	02 and 607.1	508, Florida Statu	84 City	rporation submits this statement for the		its registered
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1 do 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	Office of fr agent 1 an INAT URE ELADORESS -ST-7/P ELADORESS -ST-7/P ELADORESS -ST-7/P ELADORESS -ST-7/P ELADORESS -ST-7/P ELADORESS -ST-7/P ELADORESS -ST-7/P	P RiCHARDS, AI 2306 S 39 ST FT PIERCE FL S RICHARDS, D/ 2306 S 39 ST	r both, in the State d accept the oblig of name of registered ag OFFICERS AN	e of Floridal S gations of Sei gentaria tite it app	Such change was clion 607.0505, F Acable (NG RS DELETE DELETE DELETE	84     Crty       Ites, the above-named concord authorized by the corport lorida Statutes.       TE: Registered Agent signature req 13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CiTY - ST - ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CiTY - ST - ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CiTY - ST - ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CiTY - ST - ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CiTY - ST - ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CiTY - ST - ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CiTY - ST - ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CiTY - ST - ZIP       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       5.4 CiTY - ST - ZIP       6.1 TITLE       6.3 STREET ADDRESS	ation's board of directors. I hereby acc	DATE DATE CERS AND DIRECTC Change	Its registered s registered DRS IN 12 Addition