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

PROFIT CORPORATION.



FLORIDA DEPARTMENT OF STATE

FILED Apr 30, 1999 8:00 am Secretary of State

	PPORATION JAL REPORT		- LOCATAL BELLINATION	of State	Secretar 04-30-1999 901	y of Sta	
DOCUMENT # \$32781 1. Corporation Name DAY AND SON, INC. Principal Place of Business Mailing Address 4815 E. BUSH BLVD. P.O. BOX 2243							
208 B TAMPA FL 3361		PLA US	INT CITY FL 33566		DO NOT WRITE	IN THIS SPACE	
IAMEN EL 3001	'	03			3. Date Incorporated or Qualifed		
					02/05/1991		
2. Principal Pl	lace of Business	2a.	Mailing Address		4. FEI Number	· · · · · · · · · · · · · · · · · · ·	plied For
21		26	0:4- 4-4-		65-0244964		ot Applicable
Suite, Apt.	#, etc.	0.7	Suite, Apt. #, etc.		5. Certifcate of Status Desired		Additional equired
City & State	<u> </u>	27	City & State		6. Election Campaign Financing	\$5.00	May Be
23	-	28	•		Trust Fund Contribution	1 1	to Fees
Zip	Country		Zip	Country	8. This corporation owes the curren		
24	25	29		<u> </u>	Personal Property Tax. 10. Name and Address of New Reg	riptored Agget	□No
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curre	ent Regist	tered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
DAY, JAMES R.							
	BARRET AVENUE			82 Street Addre	ess (P.O. Box Number is Not Acceptable	e)	
PLAN	NT CITY FL 33567			83			
	•			24 27		85 Zip	Code
			,	84 City			
office or n	enistered agent, or both, in the State	e of Florid	a. Such change was auf	s, the above-named corporation	pration submits this statement for the pun's board of directors. I hereby accept	rpose of changing its	registered
office or re agent. I at SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florid pations of,	a. Such change was aut Section 607.0505, Florid	s, the above-named corporation	n's board of directors. I hereby accept the when reinstating)	Jrpose of changing its the appointment as re	registered egistered
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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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: