

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

FILED  
Jan 27 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S39837** (7)  
1. Corporation Name  
**D. B. SALES, INC.**

Principal Place of Business <b>18395 GULF BLVD. SUITE 203 INDIAN SHORES FL 33785 US</b>	Mailing Address <b>P.O. BOX 507 INDIAN ROCKS BCH. FL 34635 US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**03/20/1991**

2. Principal Place of Business 21 <b>16126 4TH STREET E</b> Suite, Apt. #, etc. 22 City & State 23 <b>Redington Beach, Fla</b> Zip 24 <b>33708</b>	2a. Mailing Address 26 <b>16126 4TH STREET E</b> Suite, Apt. #, etc. 27 City & State 28 <b>Redington Beach, FL</b> Zip 29 <b>33708</b>	4. FEI Number <b>59-3057964</b> Applied For <input checked="" type="checkbox"/> Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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9. Name and Address of Current Registered Agent

**BAKER, DYAN  
18395 GULF BLVD.  
SUITE 203  
INDIAN SHORES FL 33785**

10. Name and Address of New Registered Agent

81 Name <b>Dyan Baker</b>
82 Street Address (P.O. Box Number is Not Acceptable) <b>16126 4TH STREET EAST</b>
83 <b>Redington Beach</b>
84 City <b>FL</b>
85 Zip Code <b>33708</b>

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.

SIGNATURE

*Dyan Baker*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE <b>PD</b>	<input type="checkbox"/> DELETE
NAME <b>BAKER, DYAN</b>	
STREET ADDRESS <b>18395 GULF BLVD., SUITE 203</b>	
CITY-ST-ZIP <b>INDIAN SHORES FL</b>	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE <b>PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME <b>DYAN L BAKER</b>	
1.3 STREET ADDRESS <b>16126 4TH ST EAST</b>	
1.4 CITY-ST-ZIP <b>Redington Beach FL 33708</b>	

2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	

3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	

4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	

5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Dyan Baker*  
Signature, typed or printed name of registered agent and title if applicable.

1-15-98

CR2E034 (10/97)