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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V50244

(5)

DAD & MIKE ENTERPRISES OF WINTER PARK, INC.

Principal Place of Business Maiting Address 501 N. ORLANDO AVE 501 N. ORLANDO AVE SUITE 301 SUITE 301 DO NOT WRITE IN THIS SPACE WINTER PARK FL 32789 WINTER PARK FL 32789 3. Date Incorporated or Qualified 07/10/1992 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 59-3131140 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Flection Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zip Country This corporation owes or has paid the current year Intangible Yes 30 Personal Property Tax due June 30. 24 25 29 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name POLIDORE, MARK 557 WEST PALM VALLEY DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 1249** 83 OUIEDO FL 32765 84 City Zip Code 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. 🔲 OLLETE Change Addition TITLE 1.11005 POLIDORE, MARK NAME 1.2 NAME 501 N. ORLANDO AVE., #301 STREET ADDRESS 1.3 STREET ADDRESS WINTER PARK FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CHY-ST-7IP DELETE Change Addition TITLE 3 1 TITLE NAME 32 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 3.4. C(TY-ST-7)P DELETE Change Addition TITLE 4.1.1011E NAME 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CHY- ST- ZIP CITY-\$1-ZIP DELETE TITLE 51 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-7(P DECETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS DITY-ST-ZIP 6.4 CITY - ST- 2IP 14. Thereby 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 suppliemental 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 composition or the receiver or truested 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 in address.