SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED Sep 03 1997 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997 DOCUMENT # V54305 (0) D & D SERVICES OF TAMPA BAY, INC. Principal Place of Business Mailing Address 1915 13TH AVENUE N. 1915 13TH AVENUE N. ST PETERSBURG FL 33713 ST. PETERSBURG FL 33713 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report 07/27/1992 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3138805 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 Personal Property Tax due June 30. 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PIPER, DAVID A 945 MONTEREY BLVD NE 82 Street Address (P.O. Box Number is Not Acceptable) ST PETERSBURG FL 33704 83 84 85 Zip Code City FL 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** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE 1.1 TITLE Addition TITLE DIPER DAVID B PIPER, DAVID A NAME 1.2 NAME 1915 13th QUENO. 945 MONTEREY BLVD NE STREET ADDRESS 1.3 STREET ADDRESS ST PETERSBURG FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE FOX, BRIAN A NAME 2.2 NAME 10387 MONARCH DR STREET ADDRESS 2.3 STREET ADDRESS LARGO FL CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELE1E Change Addition TITLE 6.1 TITLE

14. Ido 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 chapted, or on an attachment within address.

CHICAD COURTED

6.3 STREET ADDRESS

62 NAME

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

> 7/10/97 813-898-1812