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

PROFIT Corporation Annual Report

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 304323

(9)

**DELL CORPORATION** 

Principal Place of Business

SIGNATURE:

•

Mailing Address

FILED							
Apr 15 1997	8:00am						
Secretary of	of State						

(954) 523-647B

2-11-97



245 S W 33RD FT LAUDERDAI		245 S W 33RD ST FT LAUDERDALE FL 33315-3327			
				3. Date incorporated or Qualified 04/20/1966	3a. Date of Last Report 05/01/1996
a	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
1		26		59-0856049	Not Applicable
= Suite Apt. ⊒	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State	F:	City & State		6. Election Campaign Financing	\$5.00 May Be
3		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
i]	25	29	30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
245	BDELL, JON A, SW 33RD ST		81 Name 82 Street Add	ress (P.O. Box Number is Not Acceptal	ole)
FT I	LAUDERDALE FL 33315		63		
			84 City		85 Zip Code
				poration submits this statement for the	FL_ _
office or r	registered agent, or both, in the State rm familiar with, and accept the oblig	e of Florida. Such change was jations of, Section 607.0505, F	authorized by the corpora	ation's board of directors. I hereby acce	pt the appointment as registered
	Signature types or protectinancial registered as		OTE: Registered Agent signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
2.	ST OFFICERS AF	DELETE	13. 11 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
itle Iame	LOBOELL, BEVERLY S	C DEFENT	1.2 NAME		CT change CT vocatio
TREET ADDRESS	81 ISLA BAHIA DR		1.3 STREET ADDRESS		
ITY-SI-ZiP	FT LAUD, FL 33316		1.4 CITY-ST-ZIP	•	
ITLE	PD	DELETE	2.1 TITLE		Change Addition
AME	LOBDELL, JON A		2.2 NAME		
STREET ADORESS	81 ISLA BAHIA DR		2.3 STREET ADDRESS		
17 Y - ST - ZIP	FT LAUD, FL 33316		2. 4 CITY - ST - ZIP		
ITLE		☐ DELETE	3.1 TITLE		Change Additio
AME			3.2 NAME		
TRLET ADDRESS			3.3 STREET ADDRESS		
-17-S1-7-P			3.4. CITY-ST-ZIP		F I Assess
ITLE		DELETE	4.1 TITLE		Change Addition
AM:			4. 2 NAME		
TREET ADORESS			4.3 STREET ADDRESS		
ITY -S1 - 7(P Juli		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
A <b>N</b> E		E Diceit	5.2 NAME		Transe Transe
rive Treet adoress			5.3 STREET ADDRESS		
ITY-ST-ZIP			5.4 CITY+ST-ZIP		
IILE		DELETE	6.1 TITLE		Change Addition
IAME			6.2 NAME		
TREET ACORESS			6.3 STREET ADDRESS	•	
CITY-SI-7IP			64 CITY-ST-ZIP		
4. Lão here	by certify that the information suppli	ed with this filing does not qua	alify for the exemption state	ed in Section 119.07(3)(i), Florida Statute	es. I further certify that the
14. I do here	on indicated on this annual report or	eupplemental annual report is	alify for the exemption state	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same leg ort as required by Chapter 607, Florida	al affact ac if mada ur

Jon A Lobdell - Pres.