## 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 # H67293

(1)

DPF INTERNATIONAL INC.

**FILED** 

Apr 18 1997 8:00am

Secretary of State

Principal Place of Business 7411 114TH AVE N. S. 307 LARGO FL 34643-5108			Mailing Address 7411 114TH AVE N. S. 307 LARGO FL 33773-5133				I SECION BUS DIVILIBRIO MOTO ABIOT THE STALL DIVILIBRIUS CONTRACTOR			
2. Principal Pi	ace of Business	2a.	Mailing Address	-			4. FEI Number		Ap	optied For
21			26				59-2555603			ot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired		<b>*</b>	Additional
22		27								equired
City & State			City & State				6. Election Campaign Financing	П		May Be to Fees
23	Constant	28	Zin	7 60	into		Trust Fund Contribution			
Zφ 	<b>γ</b>				Country		This corporation has liability for Florida Statutes	ntangible t		. 199.032,
24	25   9. Name and Address of Curre	29 ant Regis	tered Aneni	30	T		10. Name and Address of New Re			
0000		our mogra	torou Agent		81	Name				
	S, JACK					<u></u>				
1717 WINFIELD RD S. CLEARWATER FL 33516			82 Street Ad			Street Add	dress (P.O. Box Number is Not Acceptat	10)		
ULEA	MANIER PL 22310				83	<u> </u>				
									·	
					84	City		FL	85 Zip	Code
office or n agent. Lar SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Sta or familiar with, and accept the oblination for the provider providers of registered as some of registered as the provider providers or registered as the providers of the provid	te of Florid igations of	da. Such change was f, Section 607.0505, f	s authorize Florida Sta	tute:	y the corpores.	rporation submits this statement for the pation's board of directors. I hereby acce	of the appo	intment as	registered
12,	OFFICERS A			13.		one organization	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	DP		DELETE	1.1 T	ITLE				Change	Addition
NAME	GOSS, JACK			1.2 N	IAME					
STREET ADDRESS	1717 WINFIELD RD S.			1.3 \$	TREET	T ADDRESS				
City-ST-ZiP	CLEARWATER FL			1.40	)TY-5	ST-ZIP				
THLE	D		DELETE	2.1 1	ITLE				Change	Addition
NAME	O'CONNOR, JACQUELYN			2.2 N	IAME					
STREET ADORESS	1752 LAKEVIEW RD			2.3 9	STREET	T ADDRESS				
CITY - ST - ZIF	CLEARWATER FL		-			ST-ZIP				T A J Prison
TITLE	D		DELETÉ	3.1 7	ITLE				Change	Addition
NAME	GOSS, JAMES			3.2 M	VAME					
STREET ADDRESS	2103 LAUREN DR			3.3 9	STREET	T ADDRESS				
City-St-ZiP	LARGO FL		- December			ST-ZIP			Change	Addition
THUE			☐ DELETE		IITLE	.			CHRUNC	L. J. Addition
NAME					NAME	Į.				
STREET ADDRESS						T ADDRESS				
CITY+ST-ZIP			DELETE		TITLE	ST-ZIP		····	Change	☐ Addition
THILE			D.L.C.1C		NAME					
NAMÉ PROCELLABORAGE						T ADDRESS				
STREET ADDRESS										
CITY - \$1 - ZIP TITLE			☐ DELETE		TITLE	\$T-ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			once it		NAME					
STREET ADDRESS						T ADDRESS				
						ST-ZIP				
C-TY-ST-ZiP		Cook with t	tia filian dana makan				ted in Section 119 07/3/(i) Florida Statut	s I further	certify the	t the

14. I do 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: