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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT # M96549
1. Corporation Name

(4)

D & L MANAGEMENT COMPANY, INC.

FILED
Feb 28 1997 8:00am
Secretary of State

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Principal Place											
11110-122	e of Business		ling Address								
BO PARK DRIVE	E		PARK DRIVE								
APT. 2 BAL HARROUR	FI 33154	APT Bal	HARBOUR FL 33154	-1341							
BAL HARBOUR FL 33154 US			US						Date of Last Report 02/22/1996		
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number	······································	<u></u>	·	pplied For
21		26					65-0074351			N	ot Applicable
Suite, Apt.	#, etc	27	Suite, Apl. #, etc.				5. Certificate of Status D	esired			Additional equired
City & State	e		City & State				6. Election Campaign Fi	nancing		\$5.00	May Be
23		28					Trust Fund Contribution	on			to Fees
Zip	Country	<u> </u>	Zip	 	untry		B. This corporation has I				s. 199 .032,
24	25	29		30			Florida Statutes		Yes 🗌		
	9. Name and Address of Curr	ent Registe	ered Agent		041		10, Name and Address (of New Reg	istered A	gent	
	LETON, DAVID F.				81	Name					
	PARK DRIVE				82	Street Add	ress (P.O. Box Numbor is No	Acceptabl	e)		
apt	-										
BAL	HARBOUR FL 33161				83						
					84	City			FL	85 Zip	Code
44 Doreugad	to the provisions of Sections 607.0	EO2 and 60	7 1508 Florida Stat	utes the s	L	-nemed corr	noration submits this statema	nt for the n		hanging i	its registered
office or r agent. La SIGNATURE				015.6					- CATE		
SIGNATURE	Signature typed at printed name of registered OFFICERS A		TORS	13.	ed Ager	nt signature requi	ired when reinstaing) ADDITIONS/CHANGES	TO OFFIC			
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. I do hereby deed by that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ayoual 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 if Block 13 if changes, and that my name and the same legal effect as if made under oath; that it is a supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this supplied with this filing does not provide an 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 of trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicates and the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same legal effect as if made under oath; that it is a supplied with the same

SIGNATURE

SIGNATURE AND TYPES OR PRINTED WANTE OF SIGNING OFFICER OR DIRECTO

2-25-97 305-892-8168

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