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PROFIT CORPORATION : ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700066671

1. Corporation Name

D.K.H.F., INC.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90015 034 ***150.00

Dilline	, IIIO						
Principal Plac	e of Business	Mailing Address			I I MOLEGIAL LING I GALLI PORTE BOTTE ODEL	. 40114 01154 01119 01111	1996) 1191 1881
842 SEVILLA AVENUE 842 SEVILLA AVENUE							
CORAL GABLES FL 33134 CORAL GABLES FL 33134					DO NOT WRITE IN	THIS SDACE	
					DO NOT WRITE IN 3. Date Incorporated or Qualifed	THIS SPACE	
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<u> </u>	N	2a. Mailing Address			07/30/1997 4. FEI Number	1 1 4 2	plied For
一	Place of Business	├ ─¬ ~			65-0771258	<u> </u>	t Applicable
Suite, Apt.	# oto	Suite, Apt. #, etc.			05-077 1230	\$8.75 A	
	#, etc.	27			5. Certificate of Status Desired	FeeiRe	-
22 City & Stat	te .	City & State			6. Election Campaign Financing	\$5.00	May Re
23		28		`	Trust Fund Contribution	Added to	
Zip	Country	Zip	Coun	try	8. This corporation owes the current ye		
24	25	29	30	-	Personal Property Tax.		□No
	9. Name and Address of Curre	nt Registered Agent	11		10. Name and Address of New Regist	ered Agent	•
	The state of the s	JAN TOO I I	1	Name	· · · · · · · · · · · · · · · · · · ·	•	
	z, deena b			32 Street Ad	Idress (P.O. Box Number is Not Acceptable)		
	SEVILLA AVENUE			JE Street Au	Miless (1.0. Dox reminer is not recopiation)		. 10.7 - 1.7
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			'	34 City		FL S Z C	ode
-12.3 <u>- 1</u> 2.3 - 13.4 - 1	50 007.05	00 4.007.4E00. El	ton the ob-	No named on	maration submits this statement for the surns	ee of changing its:	registered
office or	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	authorized orida Statut	by the corpora es.	rporation submits this statement for the purporation's board of directors. I hereby accept the	appointment as rec	registered gistered
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14. I 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, with all other like empowered.

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