

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 245840

(4)

1. Corporation Name

THE DENISON CORP.



Principal Place of Business

36 SOUTHEAST FIRST STREET
MIAMI FL 33131

Mailing Address

4045 SHERIDAN AVENUE
245
MIAMI BEACH FL 33140
US

2. Principal Place of Business

21 4045 Sheridan Avenue

22 Suite, Apt., #, etc.
#245

23 City & State
MIAMI BEACH, FLORIDA

24 Zip
33140

25 Country
U.S.A.

2a. Mailing Address

26 Suite, Apt., #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

QUITNER, RUTH
4045 SHERIDAN AVENUE #245
MIAMI BEACH FL 33140

3. Date Incorporated or Qualified

03/22/1961

3a. Date of Last Report

03/01/1995

4. FEI Number

59-1103603

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 and 607.1506, 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 607.0603, Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Officer or Director)

(Signature of Agent or Director or Representative)

DAY

12. OFFICERS AND DIRECTORS

12a. NAME
PVP
QUITNER, DENIS
4045 SHERIDAN AVE #245
MIAMI BEACH FL
ST
QUITNER, RUTH
4045 SHERIDAN AVENUE #245
MIAMI BEACH FL

☐ DELETE

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

13a. NAME
13b. STREET ADDRESS
13c. CITY, ST, ZIP
13d. NAME
13e. STREET ADDRESS
13f. CITY, ST, ZIP
13g. NAME
13h. STREET ADDRESS
13i. CITY, ST, ZIP
13j. NAME
13k. STREET ADDRESS
13l. CITY, ST, ZIP
13m. NAME
13n. STREET ADDRESS
13o. CITY, ST, ZIP
13p. NAME
13q. STREET ADDRESS
13r. CITY, ST, ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 a later filing with an address.

SIGNATURE:

Ruth Quitner

RUTH QUITNER

1/17/96

S31-3535

SIGNATURE AND TITLE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)