

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **452247** (0)

1. Corporation Name

DIMENSIONAL TENNIS SYSTEMS, INC.



Principal Place of Business

**5151 S.W. 60TH PLACE
MIAMI FL 33155**

Mailing Address

**5151 S.W. 60TH PLACE
MIAMI FL 33155**

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Zip
24	Country	29	Country

3. Date Incorporated or Qualified

07/10/1974

3a. Date of Last Report

02/17/1995

4. FEI Number

59-1544899

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

9. Name and Address of Current Registered Agent

**MANDELSTAM, RODNEY
5151 S.W. 60TH PLACE
MIAMI FL 33155**

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

Signature of person submitting this report to the Secretary of State

Signature of New Registered Agent (if applicable)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**P
MANDELSTAM, RODNEY
5151 SW 60TH PLACE
MIAMI, FL 00000**

2. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
MANDELSTAM, CAROLE
5151 SW 60TH PLACE
MIAMI, FL 00000**

3. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
MANDELSTAM, DEON
5151 SW 60TH PLACE
MIAMI, FL 00000**

4. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP
**D
MANDELSTAM, DEEN
5151 SW 60TH PLACE
MIAMI, FL 00000**

5. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

6. TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY, ST, ZIP

5. TITLE
6. NAME
7. STREET ADDRESS
8. CITY, ST, ZIP

9. TITLE
10. NAME
11. STREET ADDRESS
12. CITY, ST, ZIP

13. TITLE
14. NAME
15. STREET ADDRESS
16. CITY, ST, ZIP

17. TITLE
18. NAME
19. STREET ADDRESS
20. CITY, ST, ZIP

21. TITLE
22. NAME
23. STREET ADDRESS
24. CITY, ST, ZIP

14. I do 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)(b), 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:

Rodney Mandelstam
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RODNEY MANDELSTAM

PRESIDENT

Nov 16, 1996

(305) 667-5990

CR2E034 (12/95)