	NOW F	U INO PER A	ETED MAY 4	ነው <sup>ላ</sup> ውስኮ	. ·	00					
PI CORP	ROFIT PORATION		FTER MAY 1 I		of S						
ANNUAL REPORT  1996			Secretary of State DIVISION OF CORPORATIONS			* 1					
DOCUM 1. Corporation I	(2)	2)									
DANBU	IRY, INC.										
Principal Place of	of Business		Mailing Address						II BIBI BIBI DII	III BABAI BA	III Oloki ololi iodi
1965 S.W. SOTH AVENUE FT. LAUDERDALE FL 33317				1955 S.W. 50TH AVENUE FT. LAUDERDALE FL 33317							
								Date Incorporated or Qualified     10/11/1957	3a. Date	of Last I 3/15/1	995
2. Principal Plac	ce of Business		2a. Mailing Address 26					4. FLI Number 59-6059370			Applied For Not Applicable
Suite, Apt. #	, etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired		Fee	5 Additional Required
City & State			City & State					6. Election Campaign Financing Trust Fund Contribution		Add	00 May Be led to Fees
Zip <b>24</b>	25	Country	Zip <b>29</b>	30				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
	9. Name and	Address of Current I	Registered Agent		81	Name		10. Name and Address of New	Hegistered	Agent	
AMH75	R MICHAEL H	1						(C) C. Flav Number in Not Accords	blo)		
SCHWAB, MICHAEL H 1955 S.W. 50TH AVENUE					82 Street Add			ss (P.O. Box Number is Not Accepta			
	DERDALE FL				83						
					84	City			<b>E</b> I	85	Zip Code
or rogistors	ad accept or both	in the State of Florida	Such change was authori	zed by the (	ve-r	named co oration's	orporat board	ion submits this statement for the proof directors. I hereby accept the ap	urpose of ch pointment as	anging its registere	registered office ed agent. I am
SIGNATURE		e obligations of, Section ted name of registered agent an	607.0505, Florida Statute	IOTE: Reg stered	Agen	r signature	required s	when reinstativisi	DATE		
12.	Signature, typed or prii	OFFICERS AND		13.	-			ADDITIONS/CHANGES TO OF			
TITLE	PD		DELETE	1.11	ITLE		DI	RECTOR		Change	e 🔲 Addition
NAME	MICHAEL,			1.2 N				CHAEL H. SCHWI			
STREET ADDRESS	PALM BEA	CEAN BLVD. #3F				ADDRESS	19	SS SW SO AVE T. LAUDERDALE, I	F/ 2	33	12
CITY-ST-ZIP TITLE	D D	OHTL	DELETE	2 11		1-212	┼-'-	1. Knowagieg		☐ Change	e Addition
NAME	-	HENRIETTA		2.2 N			l .				
STREET ADDRESS		CEAN BLVD. #3F		23 S	TREET	ADDRESS					
CITY-ST-ZIP	PALM BEA	CH FL		240	TY-S	T - 2(P					
TITLE	STD		☐ DELETE	3 1 7		•				Chang	e 🔲 Addition
NAME	DONNER,			3.2 N							
STREET ADDRESS	PALM BEA	ÆAN BLVD PH#14 CH EI		- 1		T ADDRESS	1				
CITY-ST-ZIP TITLE	FALM DCA	OIT I L	☐ DELETE	3.4 G 4. 1 T		ST-ZIP	<del> </del>			Chang	e Addition
NAME			<u></u>	4.2 N			1				
STREET ADDRESS						ADDRESS					•
CITY-ST-ZIP						ST-ZIP	1_				····
TITLE			DELETE	5.13						Chang	e 🔲 Addition

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)(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 of the resolver of trusted emporated 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 or an attachaged with an adjusts. CITY-ST-ZIP

5.2 NAME

6 1 TITLE

62 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - \$1 - 7IP

5.4 CHTY - ST - ZIP

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

DELETE

10000175249% -03/21/96--01049--007 \*\*\*200.00

CR2E034 (12/95)

Addition