COR ANNU	CORPORATION Sandra E ANNUAL REPORT Secreta		RTMENT OF STATE B. Mortham ary of State CORPORATIONS			
	MENT # 2671	88	(1)			
DIXIE	FENCE CO., INC.					
						NA ARAN BARAH BARAH BARAH BARAH BARAH BARAH BARAH
Principal Place of Business Mailing Address						
8460 SW 48 ST. 8460 SW 48 ST. MIAMI FL 33155 MIAMI FL 33155						
					Date Incorporated or Qualified 02/15/1963	3a. Date of Last Report 05/01/1995
2. Principal Pla	ace of Business	 -	ta. Mailing Address		4, FEI Number	Applied For
12			. Apt. #. etc.		59-1025370	Not Applicable
2 27			, , 4, , , , , , , , , , , , , , , , ,		5. Certificate of Status Desired	\$8.75 Additional Fee Required
¬			City & State		6. Election Campaign Financing	\$5.00 May Be
3 Zip	Country	28			Trust Fund Contribution	Added to Fees
4	25	Zip 29		Country 30	8. This corporation has liability for Florida Statutes	intangiblo tax under s 199.032,
	9. Name and Address of Cur		Agent	1901	10. Name and Address of New R	
				81 Name		
BLIZZAR	D, VIRGINIA			62 Street Add	ress (P.O. Box Number is Not Acceptab	olo)
8460 SV						
MIAMI F	L 33155			83		
				84 City		85 Zip Code
11. Pursuant te	the provisions of Sections 607 05	02 and 607 1508	Florida Statutos	the above period excep	ration submits this statement for the pur	
Or registere	ed agent, or both, in the State of Fl h, and accept the obligations of, S	ıorıda. Süçri çhanç	ae was authorize	d by the corporation's boa	ration stibinits this statement for the pur ird of directors. I hereby accept the appo	pose or changing its registered offici bintment as registered agent. I am
SIGNATURE	n, and accept the obligations of, S	ection 607.0303,	riorida Statutes.			
	Signature, typed or printed name of registered a	gent and trie if applicable	(TOM)	Registered Agent signature require	d when reinstaling	DATE
12.		ERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	P	DELETE		1 1 TITLE		☐ Change ☐ Addition
NAME	BLIZZARD, JAMES			1.2 NAME		
STREET ADORESS DITY-ST-ZIP	5860 S.W. 90TH CT. MIAMI FL 33173			1.3 STREET ADDRESS		
DITE I	MIAMI FL 331/3 \$		DELETE	1.4 CITY - ST - ZIP 2 1 TITLE	-	Change Addition
NAME	BLIZZARD, SUSAN J			2 2 NAME		□1 Augulac □1 Augulau
STREET ADDRESS	3057 DOVE WAY			2.3 STREET ADDRESS		
CITY-ST-ZIP	DECATUR GA 30033			2.4 CITY-ST-7IP		

24

TITLE

NAME

NAME

TITLE

NAME

TITLE

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

C(1Y - \$1 - ZIP

CHTY+S*-ZIP

CITY-ST-ZIP

BLIZZARD, VIRGINIA T

8460 SW 48 ST.

MIAMI FL 33155

011Y-ST-21P 6.4 CITY-ST-ZIP 14. Ido 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 an attachment with an address.

3 1 TITLE

32 NAME

4. 1 TITLE

4.2 NAME

5. 1 TITLE

5.2 NAME

6 1 TITLE

62 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY - ST - ZIP

3 4 CITY - ST - ZIP

DELETE

DELETE

DELETE

DELETE

SIGNATURE: Unguin J. Plinand VT VIRGINIA T. Bli 22/190 SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR 4 16 196 305-279-7502

Change Addition

☐ Change

☐ Change

Change

☐ Addition

Addition

CoilibbA 🔲