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PROFIT CORPORATION **ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 279360

(2)

DSA GROUP, INC.

FILED Jan 29 1997 8:00am Secretary of State

| Principal Place of Business Mailing Addre | | | ss | | I doming dinat tensin inter pitto natil | | i debit bibit mint | i Bibli (AB) |
|--|--|---|-----------------------|---------------------|---|---|---------------------------|--------------------|
| 2005 PAN AM CIRCLE TAMPA FL 33007 | | 2005 PAN AM CIRCLE TAMPA FL 33607-2359 | | | | | | |
| | | | | | 3. Date Incorporated or Qualifie 03/10/1964 | 1 | ate of Last F /17/1996 | Report |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | , | A | pplied For |
| 21 26 | | | t # oto | | | | | ot Applicable |
| Suite, Apt. #, etc. Suite, A 22 27 | | Suite, Apt #, etc. | Apt #, etc. | | 5. Certificate of Status Desired | Ж | | Additional equired |
| | | City & State | State | | 6. Election Campaign Financing | | | May Be |
| 28 | | ├ ~¬ | , | | Trust Fund Contribution | , D | | to Fees |
| Zip | | | Country | | 8. This corporation has liability | for intangible | e tax under s | 199.032 |
| 24 | 25 | 29 | 30 | | Florida Statutes | X Yes | | |
| | 9. Name and Address of Currer | nt Registered Agent | | | 10. Name and Address of New | Registered | Agent | |
| | OWN, CARLTON | | 8 | 1 Name | | | | |
| 2005 PAN AM CIRCLE | | | 8. | 2 Street Add | lress (P.O. Box Number is Not Acce | olable) | | |
| TAN | 1PA FL 33607 | | 8 | 2 | | ···· | | |
| | | | 6 | " | | | | |
| | | | В | 4 City | | FL | 85 Zip | Code |
| 41 Purcuant | to the provisions of Sections 607 050 | 2 and 607 1508. Florida Statu | itos Ilio abo | ve named cor | poration submits this statement for the | | of changing i | te registered |
| office or r | to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the oblig | of Florida. Such change was | authorized I | by the corpora | ition's board of directors. I hereby ac | cept the ap | pointment as | registered |
| | m tamiliar with, and accept the oblig | ations of, Section 607.0505, F | iorida Statuti | es. | | | | |
| SIGNATURE | Signature, typed or printed name of registered agr | ent and title 4 applicable (NO | TE: Registered A | gent signature regu | ined when reinstalleg) | DATE | · | - |
| 12. | | D DIRECTORS | 13. | | ADDITIONS/CHANGES TO OF | FICERS AN | D DIRECTOR | RS IN 12 |
| TITLE | PD | DELFTE | 1.1 1111.8 | | | | Change | Addition |
| NAME | BRYANT, KENNETH A. | | . 1.2 NAME | | | | | |
| STREET ADDRESS | 2005 PAN AM CIRCLE | | 1.3 STREFT ADDRESS | | | | | l |
| CITY-\$1-ZIP | TAMPA FL | | 14.C/TY | -ST-ZIP | | | | |
| TITLE | SD | ☐ DELETE | 2111111 | | | | Change | ☐ Addition |
| NAME | BROWN, CARLTON | | 2.2 NAM | | | | | |
| STREET ADDRESS | 2005 PAN AM CIRCLE | | | FT ADDRESS | | | | Į |
| CITY-ST-ZIP | TAMPA FL | Deltre | 2. 4 CITY | | | | Change | Addition |
| TITLE | D ALEVANDED & BYDNE | ☐ DELFTE | 3.1 TITLE | | | | L Change | ☐ Addition |
| NAME ATARET LABORES | ALEXANDER S. BYRNE | | 3.2 NAM | | | | | |
| STREET ADDRESS | 2005 PAN AM CIRCLE TAMPA FL | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | D | DELETE | 3.4 CITY 4.1 TITLE | | | | Change | Addition |
| NAME | SOFIA C. ROVIRA | <u></u> | 4.2 NAM | | | | | |
| STREET ADDRESS | 2005 PAN AM CIRCLE | | | ET ADDRESS | | | | |
| CITY-ST-ZIP | TAMPA FL | | 4 4 CITY | i | | | | |
| TITLE | | DELETE | 51 TITLE | | | | Change | Addition |
| NAME | | | 5.2 NAM | : | | | | , |
| STREET ADDRESS | | | 5.3 STRE | ET ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY | - \$1 - 7IP | | | | |
| TITLE | | DELETE | 6.1 TITLE | | | | Change | ☐ Addition |
| NAME | | | 6.2 NAM | : | | | | |
| STREET ADDRESS | | | 6.3 STRE | ET ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 CITY | - S1 - ZIP | | | | |

14. I do 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 or on an attachment with an address.