PROFIT CORPORATION FLORIDA DEPARTMENT OF STATE

CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 374683

(1)

FILED Jan 30 1998 8:00am Secretary of State

D & C PROPERTY INVESTMENTS, INC.			
D & C PROPERTY HAVESTIVIENTS, INC.			DEDEL GLULT BYSTI DJETA 1984
Principal Place of Business Mailing Address			BLEUN BYBYK BYRYN BYBUL HEBY
790 E BROWARD BLVD. STE 300 PO BOX 1477			
#24 FORT LAUDERDALE FL 33302-1477		DO NOT WOITE IN THIS	PDAOF.
FORT LAUDERDALE FL 33301 US		DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
		12/31/1970	
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For
21 1015 SE16ST 26 POBOX	2465	59-1318342	Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 27			Fee Required
City & State	2 1 MC040	6. Election Campaign Financing	\$5.00 May Be
23 FT. CAUDACE 28 FT. CAU	Country	Trust Fund Contribution	Added to Fees
210 25 Beauty 29 33303-246		This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year intangible
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered	
CURRAN, DERRANCE W	81 Name		
ZOOG E BROWARD BLVD		ess (P.O. Box Number is Not Acceptable)	
STE-204	<u> </u>		
FORT LAUDERDALE FL-33304	83		
-	84 City		85 Zip Code
607.0500 007.4500 Finds Ou		FL	
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Sta office or registered agent, or both, in the State of Florida. Such change we agent. I am familiar with, and accept the obligations of, Section 607.0505. 	is authorized by the corporati	oration submits this statement for the purpose of an's board of directors. I hereby accept the app	ointment as registered
1 100000	Florida Statutes.	1-14-	00
SIGNATURE Signature, typed or printed name of registered agent and title if applicable	NOTE, Registered Agent signature require		70
12. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE PD DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME CURRAN, DERRANCE W	1 2 NAME		
STREET ADDRESS 790 E BROWARD	1.3 STREET ADDRESS		Į.i
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In Thereby Certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)), Florida Statutes. Further certain that 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 cath; 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 charged, or on an attachment with an address.

SIGNATURE

OLDERACE W. CERRA

114/98 503

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