

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 380233 (7)

1. Corporation Name

DANMARK INC.



Principal Place of Business

333 NW 23RD ST.
MIAMI FL 33127
US

Mailing Address

4270 S.W. COUNTRY PLACE
PALM CITY FL 34990-5137

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

333 NW 23rd Street

Suite, Apt. #, etc.

27

City & State

28

Miami, FL

29

Zip

Country

30

USA

9. Name and Address of Current Registered Agent

DANIEL, GLORIA
333 NW 23 STREET
MIAMI FL 33127

3. Date Incorporated or Qualified

04/12/1971

3a. Date of Last Report

04/06/1995

4. FEI Number

59-1348379

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

10. Name and Address of New Registered Agent

81

Name

Harold S. Daniel

82

Street Address (P.O. Box Number is Not Acceptable)

333 NW 23rd Street

83

84

City

Miami

FL

85

Zip Code

33127

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, 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

Harold S. Daniel

(NOTE: Registered Agent signature required when instituting)

2/20/96

12. OFFICERS AND DIRECTORS

TITLE

PST

☒ DELETE

NAME

DANIEL, GLORIA A.

STREET ADDRESS

4270 S.W. COUNTRY PLACE

CITY-ST-ZIP

PALM CITY FL

TITLE

D

☒ DELETE

NAME

DANIEL, GLORIA A.

STREET ADDRESS

4270 S.W. COUNTRY PLACE

CITY-ST-ZIP

PALM CITY FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

President, Sec, Treas

☒ Change

☒ Addition

1.2 NAME

Harold S. Daniel

1.3 STREET ADDRESS

333 NW 23rd Street

1.4 CITY-ST-ZIP

Miami, FL 33127

2.1 TITLE

Director

☒ Change

☒ Addition

2.2 NAME

Harold S. Daniel

2.3 STREET ADDRESS

333 NW 23rd Street

2.4 CITY-ST-ZIP

Miami, FL 33127

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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)(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.

SIGNATURE: HAROLD DANIEL, *Harold Daniel*, PRES. 2/20/96 (305) 573-0610

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

CR2E034 (12/95)