1999

**DOCUMENT # 380233** 



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90035 021 \*\*\*150.00

<ol> <li>Corporation</li> </ol>	Name				1			
DANMAR	IK INC.							
<b>5</b>					# 100/00 (110/ 10/11 00/10 1/ <b>0/1</b> 0 1/	HAR CHIL ALBERT B		<b>a</b> ii <b>a</b> i <b>a</b> i i <b>i i</b> i
Principal Place	of Business	Mailing Address			1	488 1411 BERTI W	81) BIBIT BIBIT BI	#16 BIBII 5081
333 NW 23RD ST. 333 NW 23RD ST								
MIAMI FL 33127 MIAMI FL 33127					DO NOT WRITE IN THIS SPACE			
US US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified				
					,			
		A 44-11 A dalana			04/12/1971 4. FEI Number		T App	lied For
	ace of Business	2a. Mailing Address		'			Applicable	
21   26   Suite. Apt. #, etc.		Suite Ant # etc	Suite, Apt. #, etc.		39-1340379		\$8.75 A	
<b>—</b>		27		5. Certifcate of Status Desired		Fee Rec		
22 City & State		City & State		6. Election Campaign Financing \$5.00 May Be				
23	•	28			Trust Fund Contribution		Added to	- 1
Zip	Country	Zip	Country		8. This corporation owes the curr	ent year Int	angible	
24	¬ ' — — — — — — — — — — — — — — — — — —		0	Personal Property Tax.			☐ Yes ☐	□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New F	Registered A	Agent	
			81	Name				ŀ
	iel, harold s.		82	Street Addre	ss (P.O. Box Number is Not Accepta	able)		
333 NW 23 STREET			Ľ	0				
MIAN	/II FL 33127		83					
			84	City	<u> </u>		85 Zip C	ode
	**			-		<u> </u>		
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	2 and 607.1508, Florida Statutes	the above	e-named corpo	ration submits this statement for the	purpose of	changing its r	registered istered
office or re agent. I ai	egistered agent, or both, in the State on familiar with, and accept the obligat	ions of, Section 607.0505, Florid	a Statutes	ine corporation.	is board of directors. Thereby accep	or the appoin	Allioni do log	,0.0.00
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R			<del>-</del>	nt signature required		DATE	<b>2</b> 0/25050	70 1140
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AN	Change	Addition
TITLE	PST	☐ DELETE	1,1 TITLE	ļ				
NAME		DANIEL, HAROLD S.						
STREET ADDRESS	333 NW 23RD ST		1.2 NAME					
011.2211.001.230	•		1,3 STREE	TADDRESS				Addition
CITY-ST-ZIP	MIAMI FL	DO: FTF	1.3 STREE 1.4 CITY-S	1			Change	
	MIAMI FL D	☐ DELETE	1,3 STREE 1,4 CITY-S 2,1 TITLE	1	· ·		Change	☐ Addition
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CITY-ST-ZIP 14. I 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 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

MAR 26,99

(305) 573-0610