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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # 45318	39	(3)								
DOLPI	HIN SUPPLIES, INC.	Ma∄ng Ad		· · · · · · · · · · · · · · · · · · ·							
1210 CHAFF STE. B	FEE DRIVE	STE. B		i.							
TITUSVILLE	FL 32780	TITUS	/ILLE FL 32780			3.	Date Incorporated			of Last Re	
2. Principal Pla	on of Divisions	2a. Mailing	Addroop				05/16/1974 FEI Number	}	<u> </u>	08/25/19	Applied For
z. Filikiparriai	ICE OF BUSITIOSS	26 Vicinity	Audiess			"	59-15256	49			Not Applicable
Suite, Apt #	, ølc.		Apt. #, etc.			5.	Certificate of Statu			•	Additional
2		27					······································		<u></u>		Required
_ Orty & State اعر	1	City & 5	State			6.	 Election Campaign Trust Fund Contrib 	_			May Be I to Fees
Z (p	Country	Zip		Cour	ntry	8.	This corporation h		intangible ta		
4	25	29		30			Florida Statutes		□ No		
	9. Name and Address of Currer	nt Registered A	gent		04 11		. Name and Addre	ss of New R	egistered	Agent	
LOUIS	NOCO DADDADA E			l	81 Name						
	NGER, BARBARA E. S.W. 92ND AVE.			[82 Stree	Address (P	O. Box Number is	Not Acceptab	ile)		
	FL 33176			Ì	83						
				}	84 City			····································		85 Zip	Code
									FL	. 63 🗥	70000
familiar with	o the provisions of Sections 607.0502 ed agent, or both, in the State of Fiori n, and accept the obligations of, Sect	2 and 607.1508, ida. Such change tion 607.0505, FI	Florida Statutes was authorize orida Statutes.	s, the abord by the c	· · ′	corporation s s board of d	submits this stateme lirectors. I hereby ac	ent for the pur scept the appo		anging its re registered	egistered office agent. I am
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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 pin an attachment with an address.

SIGNATURE:

MARK Hollinger Pres

2/29/96 264-0333