

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

APPROVED AND FILED

95 APR 28 PM 3:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 469553 (2)

1. Corporation Name
DLIC, INC.

Principal Place of Business

% SHARON J. HUMMERHELM
3250 SW 3RD AVENUE
MIAMI FL 33129-2712

Mailing Address

% SHARON J. HUMMERHELM
3250 SW 3RD AVENUE
MIAMI FL 33129-2712

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 03/14/1975
3a. Date of Last Report 05/12/1994

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

4. FEI Number 59-1637468
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

9. Name and Address of Current Registered Agent

HUMMERHELM, SHARON J
3250 SW 3RD AVENUE
MIAMI FL 33129

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	CORTRIGHT, E.D. JR.
STREET ADDRESS	3250 S. W. 3RD AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	VP
NAME	HARDEN, DAVID M.
STREET ADDRESS	3250 SW THIRD AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	VPD
NAME	MANCILLA, JOSEPH JR. Resigned
STREET ADDRESS	3250 SW THIRD AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	SO
NAME	GARRIS, MICHELLE R. Resigned
STREET ADDRESS	3250 S. W. 3RD AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	VP
NAME	HABER, GARY
STREET ADDRESS	3250 SW THIRD AVENUE
CITY - ST - ZIP	MIAMI FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	D, AS
3.3 STREET ADDRESS	Hummerhielm, Sharon
3.4 CITY - ST - ZIP	3250 S.W. Third Ave
	Miami, FL 33129
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 as an attachment with an address.

SIGNATURE:

Sharon J. Hummerhielm
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED OFFICER OR DIRECTOR
Sharon J. Hummerhielm

4/6/95

305/854-1111

Date

Daytime Phone #