SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sangra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # (4)520131 DGL INVESTMENTS, INC. Principal Place of Business Mailing Address 295 RUSSELL HILL ROAD 295 RUSSELL HILL ROAD TORONTO, ONT., CAN. MST-221 TORONTO. ONT., CAN. MST-221 3a. Date of Last Report 3. Date Incorporated or Qualified M4V2T7 M45 2T7 12/13/1976 07/05/1995 2. Principa' Place of Business 4. FEI Number 2a, Mailing Address Applied For 58-1349096 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 28 Trust Fund Contribution Country Country Zio Zio 8. This corporation has liability for intangible tax under s. 199 032 Yes 🔲 No Florida Statutes 24 25 29 30 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 Name BRACKINS, A. J. C/O LEXOW, BRACKINS & KOFFLER 62 Street Address (P.O. Box Number is Not Acceptable) SCHLITT PROFESSIONAL PLAZA, 321-21ST ST. 83 VERO BEACH FL 32960 84 85 Zip Code 11. Pursuant to the proyisions 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE (Notice Figure terror) Agent signature required when remotining Signature, typed or pence linear colling stered agent and the diapplicable OFFICERS AND DIRECTORS (96/8)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. Change Addition TITLE DELETE 111116 E034 FELDMAN, DAVID 1.2 NAME NAME 295 RUSSELL HILL ROAD 1.3 STREET ADDRESS STREET ADDRESS M4V 2T7 CITY-ST-ZIF 1.4 City - ST - ZIP DELETE Change Addition 2.1 TIFLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP DELETE 4 1 TITLE I I Change I I Addition TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST-ZIP DELETÉ Addition TITLE 5.1 THLE NAME 5.2 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY - ST - ZIP 5.4 CITY - ST - ZIP Change Addition DELETE 61 TIFLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CHY-ST-7IP 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 an an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block is 10 chapter of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block is 10 chapter of the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and 10 /96 Daylor Proce.

OF SIGNING DAFICER OR DIRECTOR

SIGNATURE AND TYPED OR PRINTED NA

SIGNATURE: