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PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 626233 (1)

1. Corporation Name

DICO ENTERPRISES, INC.



Principal Place of Business

119 NE. 14TH ST.
MIAMI FL 33132-1312

Mailing Address

119 NE. 14TH ST.
MIAMI FL 33132-1312

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RITTER, GREGORY, J
C/O HERZFELD & RUBIN
7000 W PALMETTO PK RD., SUITE 409
BOCA RATON FL 33433

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PTD ☐ DELETE
NAME KAPLAN, EDWARD H
STREET ADDRESS 10346 NW 4 ST
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D ☐ DELETE
NAME GRUMAN, MIN R.
STREET ADDRESS 5860 N.W. 44TH ST. 415
CITY-ST-ZIP LAUDERHILL FL

TITLE D ☐ DELETE
NAME BERNA, DOROTHY
STREET ADDRESS 2235 OREGON CT.
CITY-ST-ZIP ST. LOUIS PARK MN

TITLE SD ☐ DELETE
NAME KAPLAN, JUDITH, W
STREET ADDRESS 10346 NW 4TH ST
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D ☐ DELETE
NAME LEVENSON, MARY J
STREET ADDRESS 10631 CEDAR LAKE RD, #205
CITY-ST-ZIP MINNETONKA MN

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP 33071

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP 33319

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP 55426

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP 33071

5.1 TITLE ☒ Change ☒ Addition
5.2 NAME
5.3 STREET ADDRESS 10531 Cedar Lake Rd. #205
5.4 CITY-ST-ZIP 55305

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Edward Kaplan - Pres 1/18/96

Date

Daytime Phone #

(305) 374-516

CR2E034 (12/95)