## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F11031

(4)

DALMI CORPORATION

Principal Place of Business

Mailing Address

## FILED Apr 28 1997 8:00am Secretary of State



6330 MANOR LANE. SUITE 200 BOUTH MIAMI FL 33143		6330 MANOR LANE. SUITE 200 SOUTH MIAMI FL 33143-4961			
				3. Date Incorporated or Qualified 12/08/1980	3a. Date of Last Report 05/01/1996
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied Fo
1]		26		59-2072079	Not Applica
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additiona Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 4	Country 25	Zip 29	Country 30		Yes No
	g, Name and Address of Currer	t Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
25 W	ner, Jonathan H /Est flagler street, 5th fl    Fl 33130	.OOR	82 Street Add	BLO P. SAN ROMAN gress (P.O. Box Number is Not Acceptable) SO MANOR LANG FE 200 1574 MIAMI	FL 85 Zip Code 4-33/4-
11. Pursuant to office or reagent. I as	egistered agent, or both, in the State or familia, with, end accept the oblig	of Florida Such change was dions of, Section 607,0505, I	s authorized by the corpora Florida Statutes.	rporation submits this statement for the pation's board of directors. I hereby acceptation	urnage of changing its registe
	Signature, typed or printed name of registered ago	<del></del>	DTI : Registered Agent signature req	uired when reinstating)	DVIE
12.	OFFICERS AN	D DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	FRIGULS, ANTONIO	L DILLETE	1.1 111LE		☐ Change ☐ Add
NAME	6330 MANOR LANE, STE 200		1.2 NAME		
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	S MIAMI, FL 00000		1.4 CHY-ST-ZIP		
TITLE	PDT CARLELA IODOE	☐ DELETE	2.1 TITLE		Change Add
NAME	CARULLA, JORGE		2.2 NAME		
STREET ADDRESS	6330 MANOR LANE, STE 200		2.3 STREET ADDRESS		
CITY-ST-ZIP	S MIAMI, FL 00000	[] a	2. 4 CI1Y+ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		Change Add
NAME			3.2 NAME		
STREET ADDRESS			3 3 STREFT ADDRESS		
CITY-ST-ZIP		T porter	34 CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		∐ Change ∐ Add
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DE: CIC	4.4 CITY - S1 - ZIP		Channe
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Add
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		- Dollar	5.4 CITY-SI-7IP		Observe 1 4 de
TITLE		L DELETE	61 TILLE		☐ Change ☐ Add
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	and the best of the second	al with the filter of a con-	6.4 CITY-ST-7IP	ad in Continue 440 07/00/00 French Continue	a I f when a criff of a late
14. I do hereb Information I am an of appears in	y certify that the information supplie in indicated on this annual report or sificer or director of the corporation or a Block 12 or Block 13 if changed, o	d with this filing does not qua supplemental annual report is the receiver or trustee empor r on an attachment with an a	ally for the exemption state true and accurate and the owered to execute this reproduces	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same loga ort as required by Chapter 607, Florida S	s. I rurther certify that the ill effect as if made under oath; tatutes and that my name to the total and the my name to the total and the my name to the my