SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Aug 13 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

F93000003573 (3)

DVL. INC

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·					A HORNIGA HIKO (RIPA AHKI BOKK BOKK BOKK BOKK	Br ija Briga jara bakka m ara mak marak
Principal Plan	o of Pusings	Mailing Address				
Principal Place of Business Mailing Address						20120 (112) \$111 10002 (11) 1231
24 RIVER ROAD 24 RIVER ROAD 9. O. BOX 408 9. O. BOX 408					"1	
BOGOTA NJ	BOGOTA NJ 07603			DO NOT WRITE IN	DO NOT WRITE IN THIS SPACE	
-					3. Date Incorporated or Qualified	3a. Date of Last Report
<u></u>		•• •••••••••••••••••••••••••••••••••••			07/30/1993	04/16/1996
2. Principal Place of Business		2a, Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		13-2892858	Not Applicable	
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing		
23		28		Trust Fund Contribution	\$5.00 May Be ☐ Added to Fees	
Zip			Country		8. This corporation owes or has paid	
24	25	29	30		Personal Property Tax due June 30	
ļ	g. Name and Address of Current		81		10. Name and Address of New Regis	tered Agent
CORPORATION SERVICE COMPANY				Name		
1201 HAYS STREET			82	Street	Address (P.O. Box Number is Not Acceptable)	
TA	LLAHASSEE FL 32301		83			
			03			
			84	City		85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or				cornoration submits this statement for the pure	TL	
office or r	egistered agent, or both, in the State of	I Florida. Such change was a	uthorized by	the corp	poration's board of directors. I hereby accept the	ne appointment as registered
ł -	in lainila with and accept the obligat	ions of, section 607.0005, Flo	riua olalules	S.		
SIGNATURE	Signature, typed or printed name of registered agent	and tille if applicable (NOTE	Registered Age	nt signature	required when rainstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12
TITLE	CD	☐ DELETE	1.1 TITLE			Change Addition
NAME	SMITHLINE, FREDERICK E		1.2 NAME			
STREET ADDRESS	250 PARK AVE., 14TH FL.		1.3 STREET			•
CITY-ST-ZIP TITLE			14 CITY - S	T- ZIP		Denne Dadille
NAME	ROSENBERG, MICHAEL	□ ottete	2 1 TITLE 2 2 NAME			Change Addition
STREET ADDRESS	4070 DDO4DW4V			*DDDCCC		
CITY-ST-ZIP	APPRI VODY ANY ARROY			2.3 STREFT ADDRESS 2.4 CITY-ST-ZIP		
TITLE			3.1 THILE	11 - 211		Change Addition
NAME	CASNOFF, ALAN E		3.2 NAME			
STREET ADDRESS	642 N. BROAD ST.		3.3 STREET	ADDRESS		
CITY-ST-ZIP	PHILADELPHIA PA		3.4 CITY- S	1 - ZIP		
TITLE	Ъ	★ DELETE	4.1 THLE		D	🗴 Change 🔲 Addition
NAME	GOLDEN, HERBERT L.		4. 2 NAME		Allen Yudell	
STREET ADDRESS			4.3 STREET	ADDRESS	1715 Mandylynn Court	
CITY-ST-ZIP			4.4 CITY-S	T-ZIP	Boca Raton, FL 37496	
TITLE	VPS	X DELETE	5.1 TITLE		VPS	Change Addition
NAME	A4 DUTO DO		5.2 NAME		Baldwin, Daniel	
STREET ADDRESS	BOODTA NIL 07000		5.3 STREFT	ADDRESS	24 River Road	
CITY-ST-ZIP	7		5.4 CITY-S	I - ZIP	Bogota, NY 07603	M 0
TITLE	-	- XX DELETE	61 TITLE		Chief Financial Officer	Change Addition
NAME	Zbar, Joel 24 RIVER ROAD		6.2 NAME		Flicker, Gary	
STREET ADDRESS	ST DITED DOND		6.3 STREET	audress	24 River Road	

11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 1 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.