FILED

May 10, 1999 8:00 am Secretary of State

05-10-1999 90056 021 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F96000002193

1. Corporation Name

DH ASSET, INC.

]	
Principal Place of	Business	Mailing Addres	Mailing Address			1 (BAILES (IIA IBIIA AIII/ BEILL ABIII BEILL			
3950 RCA BLVD. SUITE 5001 PALM BEACH GARDENS FL 33410		3950 RCA BLVD. Suite 5001 Palm Beach Gardens Fl 33410				DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualifed 04/26/1996			
2. Principal Place	e of Business	2a. Mailing Ad	2a. Mailing Address			FEI Number		Applied For	
21		26	26			75-2619493		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.		5.	Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & Stat	City & State		6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	, ·			This corporation owes the current year			
24	25 29		30			Personal Property Tax.	☐ Yes	□No	
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent					
OT CORPORATION OVOTEN			81	Name					
	rporation system Pine Island RD		82	Street	et Address (P.O. Box Number is Not Acceptable)				
SUITE 105 PLANTATION FL 33324			83						
				City			PL	Zip Code	
office or regis	the provisions of Sections 607.0 stered agent, or both, in the Sta amiliar with, and accept the ob-	ate of Florida. Such cha	ange was authorized by	the corpo	corporatio oration's b	on submits this statement for the purpose loard of directors. I hereby accept the a	se of changir appointment	ng its registered as registered	
SIGNATURE		and and the Kanalington	(MOTE: Panietyrad Ago	nt eignature r	anultad when	reinstating) DAT	F		
Signature, typed or printed name of registered agent and title if applicable. (NO				Registered Agent signature required when reinstating) DATE ADDITIONS/CHANGES TO DESIGES AND DIRECTORS IN 12					

☐ Addition Change DCEO **XX**DELETE 1.1 TITLE TITLE HEITMEYER, RICHARD A 1.2 NAME NAME -3950-RCA-BLVD-STE-5001 STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33410 --1,4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 2.1 TITLE treadwell. Kenneth A. 22 NAME NAME 3950 RCA BLVD STE 5001 2.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 CITY-ST-ZIP 2.4 CITY-ST-ZIP Change Addition XXDELETE 3.1 TITLE VP/D -C00 TITLE RAMSEY, JOHN E---Barbara Goransson 3.2 NAME NAME 3950 RCA Blvd. Suite 5001 -3414-PEACHTREE-RD-STE 660-3.3 STREET ADDRESS STREET ADDRESS -ATLANTA GA --Palm Beach Gardens, Florida 33410 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 4.1 TITLE TITLE HAMILTON, GEORGE 4, 2 NAME NAME 3950 RCA BLVD STE 5001 4.3 STREET ADDRESS STREET ADDRESS PALM BEACH GARDENS FL 33410 4.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 5.1 TITLE TITLE TCFO 5.2 NAME GREETHAM, DONALD NAME 5,3 STREET ADDRESS 3950 RCA BLVD STE 5001 STREET ADDRESS 54 CITY-ST-ZIP PALM BEACH GARDENS FL 33410 CITY-ST-ZIP Addition DELETE 6.1 TITLE Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

IG OFFICER OR DIRECTOR

Kenneth-Treadwell Vice President

561-776-5000

^{14.} I 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 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, with all other like empowered.