SECOND NOTICE: CORPORATION WILL BE DISCOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name F96000003639 (9)

FILED Jul 15 1998 8:00am Secretary of State

DAKOTA INTERNATIONAL COMPONATION OF AMERICA					A PROINTE AND IDNA AND ROUGH BRICK BRAIN BRICK BRAIN BRAIN	AA ALLIK BHEE MAA ION ITAL		
Principal Place of Business Mailing Address						s (addings at the rights deline about about adult a nite Sal	AN 11113 ATTACTUTE ICIT. IMA	
2631 NW 64TH BLVD 2631 NW 64TH BLVD								
BOCA RATON FL 33496 BOCA RATON FL 33496						DO NOT WRITE IN THIS S	DACE	
						3. Date Incorporated or Qualified	PACE	
						07/18/1996		
2. Prindpal Place of Business 2a. Mailing Address						4. FEI Number	Applied For	
21	isos y, sociitos	<u></u> ⊢ '	26			13-2628001	Not Applicable	
Suite, Apt	#. etc.		Suite, Apt. #, etc.			F-1	\$8.75 Additional	
22		27	¬ ' '			5. Certificate of Status Desired	Fee Required	
City & State City & State						6. Election Campaign Financing	\$5.00 May Be	
23		28	28		Trust Fund Contribution	Added to Fees		
Zip	Country	Zip	Cod	untry	,	8. This corporation owes or has paid the curre	nt year Intangible	
24	25	29	30			Personal Property Tax due June 30.	Yes No	
	9. Name and Address of Cu	rrent Registered Agent		81		10. Name and Address of New Registered A	gent	
RUBIN, JE ROME					Name			
2631 NW 64TH BLVD				82	Street Addre	ress (P.O. Box Number is Not Acceptable)		
BOCA RATON FL 33496				83				
	4			84	City		85 Zip Code	
				ا ا		<u> </u>		
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								
12.	Signature, typed or printed name of registered	d agent and tille if applicable S AND DIRECTORS	(NOTE: Regist		gent signature requir	ADDITIONS/CHANGES TO OFFICERS AND	DIDECTORS IN 12	
TITLE	CPS CPREAS		LETE 1.1 TI			ADDITIONS/CHANGES TO OFFICERS AND	T	
NAME	RUBIN, JEROME			1.2 NAME		L	Addition	
STREET ADDRESS	2631 NW 64TH BLVD		1		ADDRESS			
CITY-ST-ZIP	BOÇA RATON FL 33496		1.4 CI					
TITLE	DOG! IVIIOIT E CO TOO		LETE 2.1 TO		-217		Change Addition	
NAME		C 0	LCIC	2.2 NAME		L	1 CHANGE TI YOURGII	
STREET ADDRESS			F		ADDRESS			
CITY-ST-ZIP	}			TY-ST				
TITLE			LETE 3.1 TI		***		Change Addition	
NAME		L) Di	3.2 N/			_	cong = recipor	
STREET ADDRESS			3.3 ST	TREET.	ADDRESS		j	
CITY-ST-ZIP			3.4 C	ITY-ST	-ŽIP			
TITLE		DI	LETE 4.1 TI				Change Addition	
NAME			4.2 N	AME				
STREET ADDRESS			4.3 ST	REET.	ADDRESS			
CITY-ST-ZIP			4.4 0	TY-ST	-ZIP			
TITLE	DELETE 5.1 TO		TLE			Change Addition		
NAME			5.2 N	AME			-	
STREET ADDRESS			5,3 6	TREET	ADDRESS			
CITY-ST-ZIP			5.4 C	TY-ST	-ZIP			
TITLE		DE	LETE 6.1 TI	TLE			Change Addition	
NAME			6.2 N	AME				
STREET ADDRESS			6.3 ST	REET.	ADDRESS			
CITY-ST-ZIP				ITY-ST				
	artific that the information complied					on 110 07/2Vi) Florida Statutos I further codify the		

Thereby certify that the information supplied with this files 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 eupplemental 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 etachment with an address.