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 # G13392

1. Corporation Name

DANSK LIGHTS, INC.

Principal Place of Business Mailing Address						1011 01011 01011 011	911 91931 1991
1224 NE 8 AVENUE 1224 NE 8TH AVENUE							
FT. LAUDERDALE FL 33304 FT LAUDERDALE FL 33304							
U\$ U\$					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 12/14/1982		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Арр	lied For
21		26			<u>59-2237725</u>		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 Ad Fee Req	
City & State		City & State			6. Election Campaign Financing	\$5.00 N	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country Zip Cou		Country	,	8. This corporation owes the current year Int		_
24	25	29 30			Personal Property Tax.		□No
'	9. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered	Agent	
			81	Name			
HOLEKAMP, STARK			82	Street Add	ress (P.O. Box Number is Not Acceptable)		
1224 N.E. 8TH AVENUE					•		
FIL	AUDERDALE FL 33304		83				
			84	City	FL	85 Zip C	ode
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	of Florida, Such change was auth	ionzea by	the corporati	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoin	changing its in the name of th	registered pistered
SIGNATURE							}
SIGNATIONE	Signature, typed or printed name of registered age			nt signature require	ed when reinstating) DATE	ID DIRECTO	70.11.40
12.		ND DIRECTORS	13.	1-	ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE	PS OTABLE	☐ DELETE	1,1 TITLE			onlange	
NAME	HOLEKAMP, STARK L.		1.2 NAME				
STREET ADDRESS	4421 SEA GRAPE DR.			TADDRESS			
CITY-ST-ZIP	LAUDERDALE BY SEA FL			ST-ZIP	1.00	Change	Addition
TITLE	VT						_
NAME	CORNETTE, GEORGE	•	2.2 NAME				
STREET ADDRESS	232 N. E. 19 AVENUE			TADDRESS			
CITY-ST-ZIP	POMPANO BEACH FL	DELETE	2.4 CITY-:	S1-ZIP		Change	Addition
TITLE	e de la companya	C OFFEIT	3.2 NAME				ļ
NAME				T ADDRESS			ļ
STREET ADDRESS			3.4, CITY-				
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE	51 EII		Change	Addition
NAME			4, 2 NAME				Ì
STREET ADDRESS				TADDRESS			
١. ١			4.4 CITY-5	1			
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME.		_	5.2 NAME				Į
STREET ADDRESS			5.3 STREE	TADDRESS	•		Ì
CITY-ST-ZIP			5.4 CITY- S	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			1
CITY-ST-ZIP	,		6.4 CITY-S	ST-ZIP			

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 of an attachment with an address, with all other like empowered.

SIGNATURE:

CER OR DIRECTOR

954-768-0022

FILED Apr 22, 1999 8:00 am Secretary of State

04-22-1999 90202 038 ***150.00