

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 PM 1:52

DOCUMENT # G42009

(2)

1. Corporation Name

DADSCO, INC.

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified
06/03/1983

3a. Date of Last Report
04/20/1994

4. FEI Number
59-2291718

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

7. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

Principal Place of Business

**3001 SW 15TH ST.
BAY #A
DEERFIELD BCH FL 33442
US**

Mailing Address

**3001 SW 15TH ST.
BAY #A
DEERFIELD BCH FL 33442
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

24 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**OSHINSKY, LEONARD
1150 EAST HALLANDALE BEACH BLVD.
HALLANDALE FL 33009**

10. Name and Address of New Registered Agent

81 Name **Russ, Hope**
82 Street Address, P.O. Box Number (if Not Applicable)
3001 SW 15 ST.

84 City **Deerfield Beach** FL 85 Zip Code **33442**

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 obligation of, Section 607.0508, Florida Statutes.

SIGNATURE

Hope M. Russ **Hope M. Russ**

4-25-95

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
CUMMIS, MARC L
3001 SW 15TH ST.
DEERFIELD BCH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**V
RUSS, ROY
3001 SW 15TH ST.
DEERFIELD BCH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DST
CUMMIS, DEE
3001 SW 15TH ST.
DEERFIELD BCH FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P** ☒ Change ☐ Addition
1.2 NAME **HEITNER, ANDREW**
1.3 STREET ADDRESS **3001 SW 15 ST.**
1.4 CITY - ST - ZIP **DEERFIELD BEACH, FL 33442**

2.1 TITLE **ST** ☒ Change ☐ Addition
2.2 NAME **RUSS, ROY**
2.3 STREET ADDRESS **3001 SW 15 ST.**
2.4 CITY - ST - ZIP **DEERFIELD BEACH, FL 33442**

3.1 TITLE **V** ☒ Change ☐ Addition
3.2 NAME **RUSS, HOPE**
3.3 STREET ADDRESS **3001 SW 15 ST.**
3.4 CITY - ST - ZIP **DEERFIELD BEACH, FL 33442**

4.1 TITLE **V** ☐ Change ☒ Addition
4.2 NAME **HEITNER, LAURA**
4.3 STREET ADDRESS **3001 SW 15 ST.**
4.4 CITY - ST - ZIP **DEERFIELD BEACH, FL 33442**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

Laura Heitner **Laura Heitner**

4/25/95

305-420-0083

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #