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

PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	1996 DIVISION OF CORPORATIONS					
DOCUN 1. Corporation	MENT # Name	G42009	(2)			
DADSC	O, INC.					
Principal Place	of Business	· · · · · · · · · · · · · · · · · · ·	Mailing Address		• • • • • • • • • • • • • • • • • • • •	3 INDIVIDUAL AND AND THE CONTRACTION OF THE CONTRACT AND
3001 SW 15T	H \$T.		3001 SW 15TH ST.			
BAY #A DEERFIELD B	ICH FI 33442		BAY #A DEERFIELD BCH FL 3344	2		
US	OII IE OOTE		US			3. Date Incorporated or Qualified
2. Principal Pla	ice of Business	2	Mailing Address		-	4. FEI Number Applied For
21		26]			59-2291718 Not Applicable
Suite, Apt. #	, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional
City & State		27	City & State			Fee Required 6. Election Campaign Financing \$5.00 May Be
23		28	1 '			Trust Fund Contribution Added to Fees
Zip	·	ountry	Zip	Country		8. This corporation has liability for intangible tax under s 199.032,
24	9. Name and A	29 ddress of Current Reg		30		Florida Statutes Yes No 10. Name and Address of New Registered Agent
				81	Name	
	KY, LEONARD			82	Street A	t Address (P.O. Box Number is Not Acceptable)
1150 EAST HALLANDALE BEACH BLVD.					ļ	3001 SW 15 ST
HALLAN	DALE FL 33009			83		
	,			84	City T	DEERFIELD BEACH FL 533412
11. Pursuant to	o the provisions of	Sections 607,0502 and 6	07.1508, Florida Statutes,	the above-		
or registere familiar with	ed agent, or both, i h, and agcept the	n the Mate of Florida. Su- phligations of, Section 60	on change was authorized 7.0505, Florida Statutes.	by the corp	oration's	corporation submits this statement for the purpose of changing its registered office is board of directors. I hereby accept the appointment as registered agent. I am
SIGNATURE _	Stanford your or printed	herre of registered agent and title	d productive	Dogistered Aco	al ciaval en re	tropured when reinstating! PATE
12.	signing ypeo or printed	OFFICERS AND DIRE		13.	ii signatura re	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THILE	DP		DELETE	1. 1 TITLE		PRESIDENT Change Addition
NAME	CUMMIS, MA			1.2 NAME		HETTHER, ANDREW 3001 SW 15 ST.
STREET ADDRESS	3001 SW 151 DEERFIELD E			1.3 STREE	- 1	DEERFIELD BCH, FL 33442
CITY-ST-ZIP TITLE	V	OII FL	[] DELETE	1.4 C/TY - 5 2. 1 T/TLE	s1 - ZiP	SECRETARY, Change Addition
NAME	RUSS, ROY			2.2 NAME		RUSS ROY
STREET ADDRESS	3001 SW 151			2.3 STREET	ADDRESS	30015W 15 ST.
CITY-ST-ZIP	DEERFIELD E	SCH FL	A Devere	2.4 CITY-	ST-ZIP	DEERFIELD BCH FL 33442- UICE PRESIDENT Change DEAddition
TITLE	dst Cummis, de	-	DELETE	3. 1 TITLE		HEITNER, LAURA
NAME STREET ADDRESS	3001 SW 151			3.2 NAME	t address	
CITY-S1-ZIP	DEERFIELD 8			3.4 City-	I	DEEREIELD BOK EF 33117
TITLE			☐ DELETE	4. 1 TITLE		DEERFIELD BCH FL 33119 XAddition
NAME				4.2 NAME		Russ, HOPE
STREET ADDRESS					ADDRESS	3001 SW 15 ST.
CITY-ST-ZIP TITLE			DELETE	4.4 CiTY- : 5. 1 TITLE	ST - ZIP	DEERFIELD BCH, FL 33442
NAME			La Section	5.2 NAME		- County - Notation
\$1REET ADDRESS				5.3 STREE	r address	
CHTY - ST - ZIP				5.4 CITY-	ST-ZIP	
TITLE			☐ DELETE	6. 1 TITLE		☐ Change ☐ Addition
NAME				6.2 NAME		
STREET ADDRESS					F ADDRESS	
CHY-ST-ZIP 14. I do hereb	L y certify that the inf	ormation supplied with th	is filing is voluntarily furnish	6 4 CITY - ned and doe		Lualify 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 pn an attachment with an address.

SIGNATURE: OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 954-H20-0083