| COF<br>ANNU   | PROFIT<br>RPORATION<br>JAL REPORT<br>1996   | Sance<br>Soc<br>DIVISION                                 | PARIMENT OF STATE<br>dra B. Mortham<br>retary of State<br>OF CORPORATIONS  |  |   |
|---|---|--|--|--|---|
| DOCUMENT # H00199 (0)<br>1. Corporation Name  |   |  |  |  |   |
| Domin   | NON ENTERPRISES, INC.   |  |  |  |   |
| Principal Place<br>17547 ROCKI<br>FT. MYERS F   | EFELLER CIR   | Mailing Address<br>17547 ROCKEFELLE<br>FT. MYERS FL 3391 |  |  |   |
|   |   |  |  | 3. Date Inconporated or Qualified<br>04/23/1984  | 3a. Date of Last Report<br>03/03/1995   |
| 2. Principal Pla<br>1   | ace of Business   | 2a. Mailing Address<br>26                                |  | 4. FEL Number<br>59-2468521  | Applied For<br>Not Applicable   |
| Suite, Apt. :<br>2]   | #, etc.   | Suite, Apt. #, etc.<br>27]                               |  | 5. Certificate of Status Desired   | \$8.75 Additional Fee Required  |
| City & State<br>3   | 9   | City & State   | ······································   | 6. Election Campaign Financing<br>Trust Fund Contribution  | S5.00 May Be<br>Added to Fees   |
| _Ζιρ<br>4]  | Country<br>25   | 29   | Country<br>30  | 8. This corporation has liability fo<br>Florida Statutes   | r intangible tax under s 199.032,<br>is □No   |
|   | 9. Name and Address of Curren   | nt Registered Agent                                      | 81 Name  | 10. Name and Address of New  | Registered Agent  |
| Haines, Kathryn L.<br>17547 Rockefeller Cir.  |   |  | 82 Street Ac   | ddress (P.O. Box Number is Not Accepta   | ible)   |
|   |   |  | OZ STEELAC   |  |   |
| 17547 R   |   |  | 83   |  |   |
| 17547 R   | OCKEFELLER CIR.   |  |  |  |   |
| 17547 R<br>FT. MYE  | OCKEFELLER CIR.<br>RS FL 33912  | 2 and 607.1508, Florida Stat                             | 83<br>84 City  |  | FL 85 Zip Code  |
| 17547 R<br>FT. MYE  | OCKEFELLER CIR.<br>RS FL 33912  |  | 83<br>84 City<br>utes, the above named corr<br>cred by the compression's be  | poration submits this statement for the protocol of directors. I hereby accept the ap                        | FL 85 Zip Code  |
| 17547 R<br>FT. MYE  | COCKEFELLER CIR.<br>RS FL 33912<br>to the provisions of Sections 607.0502<br>ed agent, or both, in the State of Flori<br>th, and accept the obligations of, Sect<br>Signature speed or priced ram coll registered age of  | and the frappoarts (                                     | 83<br>84 City<br>utes, the above named corr<br>cred by the compression's be  | poration submits this statement for the po<br>pard of directors. Thereby accept the ap                       | FL 85 Zip Code  |
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| 17547 R<br>FT. MYE  | COCKEFELLER CIR.<br>TRS FL 33912<br>to the provisions of Sections 607.05/05<br>ed agent, or both, in the State of Flori<br>th, and accept the obligations of Sect<br>Standard typed or printed here of registered agent<br>OFFICERS AN<br>P<br>HAINES, KATHRYN L.   | and the frappoarts (                                     | 83<br>84 City<br>utes, the above named corp<br>rized by the corporation's bo<br>res.   | poration submits this statement for the po<br>pard of directors. Thereby accept the app<br>und whenerstating | FL 85 Zip Code<br>urpose of changing its registered office<br>pointment as registered agent. I am   |
| 17547 R<br>FT. MYE  | COCKEFELLER CIR.<br>TRS FL 33912<br>to the provisions of Sections 607.05/02<br>ed agent, or both, in the State of Flori<br>th, and accept the obligations of, Sect<br>Signature typed or printed rear to frequencies and<br>OFFICE RS AN<br>P<br>HAINES, KATHRYN L.<br>17547 ROCKEFELLER CIR.   | and tribul applicable (<br>D DIRECTORS                   | 83     84     City       utes, the above named correction's bores.     10011     Registered April scinator real       NOTE     Registered April scinator real     1.1       1.1     11LE     1.2       1.3     STREET ADDRESS     1.3  | poration submits this statement for the po<br>pard of directors. Thereby accept the app<br>und whenerstating | B5     Zip Code       urpose of changing its registered office     pointment as registered agent. I am       path     DATE       HCERS AND DIRECTORS IN 12     12   |
| 17547 R<br>FT. MYE<br>FT. MYE<br>1. Pursuant to<br>or registere<br>familiar wit<br>IGNATURE<br>2.<br>ILE<br>Mě<br>Rét LADDRESS<br>IV-SL-ZIP | COCKEFELLER CIR.<br>SRS FL 33912<br>to the provisions of Sections 607.0502<br>ed agent, or both, in the State of Flori<br>th, and accept the obligations of, Sect<br>Signature typed or pretained corregistered agent<br>OFFICERS AN<br>P<br>HAINES, KATHRYN L.<br>17547 ROCKEFELLER CIR.<br>FT. MYERS FL<br>VP   | and tribul applicable (<br>D DIRECTORS                   | 83     84     City       uites, the above named correction's bold by the corporation's bold by the corporation's bold by the corporation's bold by the corporation reaction reaction.     13.       1.1 THLE     1.2 NAME  | poration submits this statement for the po<br>pard of directors. Thereby accept the app<br>und whenerstating | FL 85 Zip Code   urpose of changing its registered office bointment as registered agent. I am   DATE   HCERS AND DIRECTORS IN 12   Change   Addition  |
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