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FILED
Mar 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # H76058

(7)

1. Corporation Name

DCA CML ACCEPTANCE, INC.

Principal Place of Business

% MORRIS J. WATSKY, ESQ.
700 N.W. 107TH AVENUE
MIAMI FL 33172

Mailing Address

% MORRIS J. WATSKY, ESQ.
700 N.W. 107TH AVENUE
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/16/1985

4. FEI Number

59-2581647

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

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

9. Name and Address of Current Registered Agent

WATSKY, MORRIS J., ESQ.
700 N.W. 107TH AVENUE
MIAMI FL 33172

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when re-installing)

DATE

12. OFFICERS AND DIRECTORS

TITLE DC
NAME MILLER, LEONARD
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL
☒ DELETE

TITLE PD
NAME SAINOTZ, STEVEN J.
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL
☒ DELETE

TITLE V
NAME MODIST, DEBRA
STREET ADDRESS 700 NW 107 AVE
CITY-ST-ZIP MIAMI FL
☐ DELETE

TITLE VT
NAME MUNOZ, JANICE
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL
☐ DELETE

TITLE V
NAME KAMINSKY, NANCY
STREET ADDRESS 700 NW 107TH AVE, 4TH FL
CITY-ST-ZIP MIAMI FL
☐ DELETE

TITLE VS
NAME REED, LINDA
STREET ADDRESS 700 NW 107TH AVE
CITY-ST-ZIP MIAMI FL
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE AS
1.2 NAME Irvine, Patricia
1.3 STREET ADDRESS 700 NW 107 AVE.
1.4 CITY-ST-ZIP Miami, FL 33172
☐ Change ☒ Addition

2.1 TITLE D, C, P
2.2 NAME PeKor, Allan J.
2.3 STREET ADDRESS 700 N.W. 107 Ave.
2.4 CITY-ST-ZIP Miami, FL 33172
☐ Change ☒ Addition

3.1 TITLE V, S
3.2 NAME Modist, Debra
3.3 STREET ADDRESS 700 N.W. 107 Ave
3.4 CITY-ST-ZIP Miami, FL 33172
☒ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ Addition

5.1 TITLE D, AS, V, CFO
5.2 NAME Kaminsky, Nancy
5.3 STREET ADDRESS 700 NW 107 Ave.
5.4 CITY-ST-ZIP Miami, FL 33172
☒ Change ☐ Addition

6.1 TITLE V, S
6.2 NAME Reed, Linda
6.3 STREET ADDRESS 700 NW 107 Ave.
6.4 CITY-ST-ZIP Miami, FL 33172
☒ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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:

Debra Modist 1/9/98 (305) 229-6400

CR2E034 (10/97)