## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

J43768

(7)

DANCOLL OF U.S., INC.

Mailing Address

3963-E COCO PLUM CIRCLE COCONUT CREEK FL 33083 US

Principal Place of Business

3963-E COCO PLUM CIRCLE COCONUT CREEK FL 33063

**FILED** Apr 09 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

								3. Date Incorporated or Qualit	ied			
			17					11/19/1986				
<b>–</b>	lace of Business	2a, Mailing Address					4, FEI Númber				Applied For	
Suito Ant	# oto	Suite, Apt. #, etc.				59-2897374				Not Applicable		
Suite, Apt. #, etc.			27				5. Certificate of Status Desire	d 	\(\overline{\pi}\)		Additional Required	
City & State	е	City & State					6. Election Campaign Financi	ng	_		May Be	
3]	<del></del>	26					Trust Fund Contribution		<u> </u>		to Fees	
Zip		Country	Zip		Cour	ntry		8. This corporation owes or he	•		_ ′ ′	~~ ·
24	25	Address of Current I	29	A	30		<del></del>	Personal Property Tax due				M No
			registereo.	Agent		81	Name	10. Name and Address of Ne	w wed	stered	Agent	~
SKAANING STEEN						۱,	Name			_		
3483-E COCO PLUM CIRCLE COCONUT CREEK FL 33083						82 Street Address (P.O. Box Number is Not Acceptable)						
						63						
					[	83						
					ī	64	City			FL	<b>85</b> Zip	Code
44 Dureuget	to the provisions	of Sections 607 0502	and 607 150	8 Elorida Status	loc the ab		named core	poration submits this statement for	tha nu		f changing	ito registered
office or r	egistered agent, a	or both, in the State of	Florida, Suc	ch change was	authorized	Ιbν	the corporal	tion's board of directors. I hereby a	accept	the app	ointment a	s registered
	m tamılar witti, ar	nd accept the obligation	ons or, Secti	on 607,0505, Fi	orida Statu	Jtes.						
SIGNATURE	Signature typed or prin	iled name of ingistered agent a	and little if applica	able (NO	E: Registered	Agen	ni signature requi	ired when reinstating)		DATE		
12.		OFFICERS AND I			13.			ADDITIONS/CHANGES TO C	FFICE	RS AND	DIRECTO	RS IN 12
TITLE	DV			DELETE	1.1 1(1)	Lŧ					Change	Addition
NAME	SKAANING	. STEEN			1.2 NA	ME						
STREET ADDRESS		CO PLUM CIRCLE			1.3 STR	1.3 STREET ADDRESS						]
CITY-ST-ZIP		CREEK FL			1.4 Cm	Y-ST	-ZIP					
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STREET ADDRESS					2.3 STR	EET A	ADDRESS					ļ
CITY-ST-ZIP					2. 4 CIT	TY-SI	T-ZIP					
TITLE				DELETE	3.1 T(T)	LE					Change	Addition
NAME					3.2 NA	ME						
STREET ADDRESS					3.3 STR	REET /	ADDRESS					1
CITY-ST-ZIP					3.4. CfT	TY - \$1	T-21P					j
TITLE				DELETE	4.1 TITL	LE					Change	Addition
NAME					4. 2 NA	ME	1					
STREET ADDRESS					4.3 STR	REET A	ADDRESS					
CITY-ST-ZIP					4.4 CIT	Y-\$T	-ZIP					
TITLE				DELETE	5.1 TITI	LE					Change	☐ Addition
NAME					5.2 NA	ME	-					ļ
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NAME				^	6.2 NAI	ME						
STREET ADDRESS		Δ	/	<b>/</b>	6.3 STA	REET A	ADDRESS					ļ
CITY-ST-ZIP		/_			6.4 CIT	Y-ST	- ZIP					
Officer or	certify that the info on this annual rej director of the coi or Block 13 if cha	rporation of the receiv	this filing di annual repor er or trystee ment with a	vempowered to	or the exer curate and execute th	mpti I tha nis re	ion stated in t my signatu eport as req	Section 119.07(3)(i), Florida Statu ire shall have the same legal effec- juired by Chapter 607, Florida Stati	les. I fu : as if r utes; a	irther ce nade un nd that r	irtify that th ider oath; th my name a	e information hat I am an ppears in
SIGNAT	'URE:	SHUM	H)					4-6-88				