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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # K08895

DEWITT DESIGN STUDIOS, INC.

(0)

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**FILED** 

Apr 07 1997 8:00am

Secretary of State

Principal Place of Business Mailing Address										A COMPANY OF STREET	INCOMPOSITE PROPERTIES		ALAN ASES ASS	ii Albii 1831
268 NE 32ND COURT OAKLAND PARK FL 33334  268 NE 32ND COURT OAKLAND PARK FL 33334-1138														
										Pate Incorporate 12/24/1987	ed or Qualified		ate of Last F 107/1996	Report
2. Principal	Place of Busines		2a. Mailing Address					4. F	El Number 65-0019323	<b>1</b>	<del>-1,</del>		pplied For ot Applicable	
Suite, Ap	Same ot #, etc		27	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required						
City & Sta	ale	***		City & Stat	e					lection Campai			\$5.00	May Be
23			28							rust Fund Contr			<del></del>	to Fees
Ζιρ <b>24</b>	Country 25			Zip Country <b>30</b>			тy		8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes  No					
			of Current Reg			1					ess of New Re	istered	Agent	
M	ALTBY, DANIEL		<del></del>		***************************************	В	1	Name			······································			
	38 NE 32ND C					<u> </u>	2	Street Addre	ess (P.C	D. Box Number	is Not Acceptab	le)		
0/	akland Park	FL 33334				8:	3							
						8-	$\perp$	City					85 Zip	Code
							1	Oity				FL	.   65   2.15	0000
11. Pursuar office or agent I	nt to the provision r registered ager I am familiar with,	ns of Sections it, or both, in , and accept	607.0502 and the State of Flo the obligations	607,1508, Flo rida, Such ch of, Section 60	orida Statute: ange was au 07.0505, Flor	s, the about horized t ida Statut	ve- by es.	named corporati	oration ion's bo	submits this sta ard of directors	tement for the p . I hereby accep	urpose o t the app	f changing i cointment as	lts registered s registered
SIGNATURE	The state of	mill	1110	Ula-		an	7	e 7 — 7	70	IThy	4	- 7 -	77	
45	Signature, typed or		gistered agent and the		(NOTE		ger	t signature require			NGES TO OFFIC	DATE	DIDECTO	30 IN 10
12.	PD	OFFIC	CERS AND DIRE		DELETE	13.			AL	DUTTONS/CHAP	NGES TO OFFIC	EHS AND	Change	Addition
TITLE NAME	DEWITT, D	FIRNAF			DELLIE	1.1 TITLE 1.2 NAME							L Cuange	L Nation
NAME STREET ADDRESS	000 N F 0					1		DODECC						
	OAKLAND					1.3 STRE								
CITY-ST-ZIP TITLE	STD	,,,,,,,,		П	DELETE	1.4 City- 2.1 Title		· ZIF				~	Change	Addition
NAME	MALTBY, C	ANIFI			DELEVE	2.2 NAME			11.				only	L Mannon
STREET ADDRESS	500 NE 6					2.3 STRE		INDRESS						
CITY: \$1-2)P	OAKLAND					2. 4 CITY								
TITLE					DELETE	3.1 TITLE							Change	Addition
NAME						3.2 NAME							<b>.</b>	
STREET ADDRESS	s					3.3 STRE		ADDRESS						
CITY-ST-ZIP						3.4. CITY	-				* -	•		
TITLE	1				DELETE	4.1 TITLE						<del>-</del>	Change	Addition
NAME						4. 2 NAM	1E			·				
STREET ADORESS	s					4.3 STRE	ETA	DDRESS						
CITY-ST-ZIP						4.4 CITY		1						
TITLE					DELETE	5.1 TITLE							☐ Change	Addition
NAME						5.2 NAM	Ε						*	
STREET ADORESS	s					5.3 STRE	ET A	ADDRESS						
CHY-SI-ZIP						5.4 CITY	- \$1	- ZiP						
THILE					DELETE	6.1 TITLE							Change	Addition
NAME						6.2 NAMI	E							
STREET ADDRESS	s l					6.3 STRE		address						
OLLY CL 30	-					6.4.000								

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

aniel Malthylate 4-2-97