PROFIT CORPORATION ANNUAL REPORT 1996	Ft ORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS				
OCUMENT # K26592 (1) DANDURAND CORPORATION					
cipal Place of Business	Mailing Address		i i i i i i i i i i i i i i i i i i i	Bill ildi Billi distrarati	
00 w oakland PK BLVD., BLDG. G Inirise FL 33351	7800 W OAKLAND PK BL SUNRISE FL 33351	VD., BLDG. G			
MMIDE PL 33301			3. Date Incorporated or Qualifie 06/20/1988	3a. Date of Last 04/12/19	
	2a. Mailing Address		4. FEI Number		Applied For
rincipal Place of Business	26		65-0131316	\$9.7	Not Applicable 75 Additional
uite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	L) Fe	e Required
ity & State	City & State		6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
	28	Country	8. This corporation has liability	for intangible tax under	
Country 25	29	30	Florida Statutes 10. Name and Address of Ne	Yes 🔼 No	
9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of Ne	W Registered Agent	
DANIDURAND LUICIEN		1 - 1	dress (P.O. Box Number is Not Acce	ptable)	
DANDURAND, LUCIEN 7800 West Oakland Park BLVD.					
BLDG. G		83		- 12-1	Zip Code
SUNRISE FL 33351		84 City		FL I L	
or registered agent, or both, in the State of Fl	orida. Such change was authorize	s, the above named corp d by the corporation's bi	poration submits this statement for the pard of directors. I hereby accept the	purpose of changing i appointment as registe	its registered on ered agent. I am
or registered agent, or both, in the obligations of, Sr familiar with, and accept the obligations of, Sr NATURE Signature typed or printed name of register 1 as	ection 607,0505, Florida Statutes.	E Registered Agent signature (e)		DATE OFFICERS AND DIREC	OTORS IN 12
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SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

Crafe Daytine Priore F