FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name K66536

(9)

DIMIL MANAGEMENT CORP.

D-M-I- I	MANAGEMENT CONT.				
Principal Place o	of Business	Mailing Address		110010111	
555 N.E. 15TI	h street	555 N.E. 15TH STRI	EET		
9TH FLOOR MIAMI FL 33132		9TH FLOOR MIAMI FL 33132		3. Date Incorporated or Qualified 02/17/1989	3a. Date of Last Report 04/28/1995
		2a. Mailing Arldress		4. FEI Number	Applied For
2. Principal Place	ce or Busness	26 55 5 NE	-15 STREET	65-0098451	Not Applicable
Suite, Apt. #.	, etc.	Suite, Apt #, etc. 27 Sulf4	938	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State 28 Min wi	E.I	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
2 φ	Country	28 24 23132	Courito DAdha	8. This corporation has liability for Florida Statutes Yes	
24	9. Name and Address of Cu		130	10. Name and Address of New F	Registered Agent
	9. Name and Address of Ou	The state of the s	81 Name		
CHELON	W, DANIEL J.		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)
	. 15TH STREET		Street Add	62 Street Address tr. 6 Townson to the	
9TH FLO			83		
			84 Orty		85 Zip Code
•			' '	oration submits this statement for the pured of directors. Thereby accept the app	FL 83 Zip Code
familiar wit	th, and accept the obligations of,	Section 607.0505, Fibrida Statul	politi fingetered Agent signat in terrio	and of directors. Thereby accept the app	DATE FICERS AND DIRECTORS IN 12
12.		S AND DIRECTORS	13.	ADDITIONS CHANGES TO OF	Change Addition
TIFLE	PD PARTY DANIEL I	Clottit	12 NAMÉ		
NAME	SHELOW, DANIEL J. 555 N.E. 15TH ST. 9TH	Ci	1.3 STREET ADDRESS		
STREET ADDRESS	MIAMI FL	rL .	14 CHY-ST-ZIP		
CITY - ST - ZIP	MIAMI FL	DELETE	2 1 TITLE		Change Addition
TITLE NAMÉ			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2.4 City \$1 - 20°		
TITLE		☐ DELF1E	3 1 TILLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+S1-ZIP			3.4 CITY S1-719		Change Addition
TITLE		☐ DELFTE	4 1 TITLE		Change C Adoltion
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS	1000017	91731
CITY - ST - ZIP			4.4 CitY+\$1 - ZiP	1000017 -04/24/9601	102023:hange
TITLE		☐ DELETE	5 1 TITLE	***200.00	COL GEOMAGE E MARIE
NAME			5 ? NAME	***CUU.UU	
STREET ADDRESS			5.3 STREET ADDRESS		

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3(k), 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 cath, 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

5.4 C/TY - ST / Z/P

6.3 STREET ADDRESS

64 CITY ST-ZIP

6 1 HTLF

6.2 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

TITLE

NAME

PANIA STABOW SIGNATURE AND TYPED OR PRINTED NAME OF

DELETE

301-374-573/

☐ Change

CR2E034 (12/95)