

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90099 020 ***150.00

DOCUMENT # K81605

1. Corporation Name
DENDI ENTERPRISES, INC.



Principal Place of Business
402 AUTUMN CHASE DR
VENICE FL 34292
US

Mailing Address
402 AUTUMN CHASE DR
VENICE FL 34292
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/19/1989

2. Principal Place of Business

21 1030 CORALINA LANE

2a. Mailing Address

26 1030 CORALINA LANE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 DELRAY BEACH, FL.

City & State

28 DELRAY BEACH, FL.

Zip

24 33483

Country

25 USA

Zip

29 33483

Country

30 USA

4. FEI Number

65-0118176

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

PUSKARIC, DENNIS M
402 AUTUMN CHASE DR
VENICE FL 34292

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]

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ~~PTDV~~ PRES-TREAS. ☐ DELETE
NAME PUSKARIC, DENNIS M.
STREET ADDRESS ~~402 AUTUMN CHASE DR~~ 1030 CORALINA LANE
CITY-ST-ZIP ~~VENICE FL~~ DELRAY BEACH, FL. 33483

TITLE VP-SECTY. ☐ DELETE
NAME PUSKARIC, DIANNE L.
STREET ADDRESS 1030 CORALINA LANE
CITY-ST-ZIP DELRAY BEACH, FL. 33483

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/99

Date

521-276-8005

Daytime Phone #

CR2E034 (1/98)

0480379