

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
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90117 042 ***150.00

DOCUMENT # K85864

1. Corporation Name

DNS INDUSTRIES, INC.

Principal Place of Business
3000 N. W. 125TH STREET
MIAMI FL 33167

Mailing Address
3000 N. W. 125TH STREET
MIAMI FL 33167

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/04/1989

4. FEI Number

65-0126980

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 5979 N.W. 151ST ST

Suite, Apt. #, etc.

22 Suite 212

City & State

23 MIAMI LAKES FL

Zip

24 33014

Country

2a. Mailing Address

26 5979 N.W. 151ST ST

Suite, Apt. #, etc.

27 Suite 212

City & State

28 MIAMI LAKES FL

Zip

29 33014

Country

30

9. Name and Address of Current Registered Agent

SCHANTZ, LAWRENCE M ESQ
SUITE 3650 FIRST UNION FINANCIAL
200 SOUTH BISCAYNE BLVD
MIAMI FL 33131

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE DP
NAME SCHAEETER, DAVID
STREET ADDRESS 3000 NW 125TH ST
CITY-ST-ZIP MIAMI FL 33167

TITLE DEVP ☒ DELETE

NAME SHARF, MICHAEL
STREET ADDRESS 3000 NW 125TH ST
CITY-ST-ZIP MIAMI FL 33167

TITLE DEVP ☐ DELETE

NAME SCHAEETER, NEAL
STREET ADDRESS 3000 NW 125TH ST
CITY-ST-ZIP MIAMI FL

TITLE DS ☐ DELETE

NAME SCHAEETER MARVIS
STREET ADDRESS 3000 NW 125TH ST.
CITY-ST-ZIP MIAMI FL 3316-7

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 ☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

305 7691200

CR2E034 (1/98)

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