	PROFIT CORPORATION ANNUAL REPORT 1996	ATHE SO	LORIDA DEPARTM Sandra B. M Secretary o DIVISION OF COF	MENT OF STATE fortham	•	•		
D	OCUMENT # <b>K9</b> Corporation Name	2916	(1)	•				
1	O'DWYER COMPANY					) jadialik ara jawa mina mga wana	- Zilli Bigili Bigir Bigir Albu All	)
Prind	cipal Place of Business	Mailing A	ddress					
3114 45TH ST., STE. 5 WEST PALM BEACH FL 33407  3114 45TH ST., STE. 5 WEST PALM BEACH FL 33407								
					İ	3. Date Incorporated or Qualified 05/23/1989	3a. Date of Last 06/20/19	,
2. P 21	Principal Place of Business	28. Mailing	Address			4. FEI Number 65-0136935		Applied For
S 22	cuite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	Apt. #, elc.			Certificate of Status Desired		Not Applicable  5 Additional
23 23	ity & State	27 City & 28	State			Election Campaign Financing     Trust Fund Contribution	\$5.	OO May Be
24 24	25	Zip 29	30	Country		8. This corporation has liability for in Florida Statutes Y Yes		
	9. Name and Address of	of Current Registered A	gent	81 Name	_	0. Name and Address of New R	egistered Agent	
;	DWYER, JOSEPH M 375 FAIRWAY CIRCLE FT. LAUDERDALE FL 33326		83	Address 1/4	IEL JUYER IP.O. Box Number is Not Acceptabl 15th STRUT #5		7ın 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 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  SIGNATURE  DANICL DANIC.  Signature, typed or printed name of registered agent are title if applicable.  INDIE registered Agent signature Rypired when reinstation.  INDIE registered Agent signature Rypired when reinstation.  DATE								
12.	OFFIC	ERS AND DIRECTORS		13.		ADDIDONS/CHANGES TO OFFIC	DATE CERS AND DIRECT	ORS IN 12
TITLE NAME STREET	P DWYER, DANIEL 3114 45TH ST. UNIT	5		1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS	SANDI	CTOR RA HEMPCLMANN 45th Street KNIT	Change	DE034 (12.95)
CITY - S TITLE	ST-ZIP WEST PALM BEACH I		200,000	1.4 C(TY - ST - Z(P	WEST	PARM BEACH, FL. 3	<u></u>	
NAME STREET	DWYER, JOSEPH M 375 FAIRWAY CIRCLE		`	2.1 TITLE 2.2 NAME 2.3 STREET ADORESS	,		Change	☐ Addition ○
DITY-S TITLE NAME	D DWYER, AUDREY	· · · · · · · · · · · · · · · · · · ·	OELETE :	2.4 CITY-ST-ZIP 3.1 TITLE			☐ Change	☐ Addition
	ADDRESS 3114-45TH ST UNIT 5		:	3 2 NAME 3 3. Street Address 3 4 City-St-Zip				
TITLE NAME	D MCCALL, COLLEEN		DELETE .	4. 1 TITLE 4.2 NAME			Change	Addition
STREET CITY-S	ADDRESS 3114-45TH ST UNIT 5 T-ZIP WEST PALM BEACH F			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP				
	D CIAMPI, EILEEN ADDRESS 3114-45TH ST UNIT 5		5	5 1 TITLE 5.2 NAME 5.3 STREET ADORESS			Change	Addition
TITLE NAME	I-ZIP WEST PALM BEACH F  D  DWYER, ROBERT  ADDRESS 3114-45TH ST UNIT 5	····	DELETE 6	5 4 CHY-ST-ZIP 5 1 THILE 5 2 NAME			Change	Addition
CITY-ST	WEST PALM BEACH F	inglied with this filing is us	6 Shuntarily 6 majahad a	i 4 CITY-ST-ZIP	lity for the	everyption stated in Daniel	rovia r	
14. I 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 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: DANICE DWYCK Warmed Lynn PRES. 2-27-96 (407) 684-0135								