Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90058 009 ***150.00

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

DOCUMENT # L31130 1. Corporation Name

DALLAS-DALLAS INC.

DUPPUO	DALL	10,	11.00

J. 1021 (5												
Principal Place of Business Mailing Address											1911 81811 81811 1	
C/O JEFFREY A. DEUTCH. ESO. 7777 GLADE RD SUITE 300 80CA RATON FL 33434 US C/O JEFFREY A. DEUTCH. ES 7777 GLADES RD. STE. 300 80CA RATON FL 33434 US			SQ.			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 11/21/1989						
2 Principal P	lace of Business	<u>. </u>	2a. Mailin	g Address				4.	FEI Number	,	Ar	plied For
21	26								65-0156484	•	No	t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.			<u> </u>		ed 🗀	\$8.75	Additional	
22			27			5.	Certificate of Status Desire	,u	Fee Re	equired		
City & State			City & State			6.	Election Campaign Finance Trust Fund Contribution	ing 🗆	\$5.00 Added	May Be to Fees		
Zip		Country	Zip		Country	у_		8.	This corporation owes the	current year Int	angible	
24	25	•	29	30	0				Personal Property Tax.		☐ Yes	□No _
	. 9. Name and	Address of Current F	Registered A	Agent				10.	Name and Address of N	ew Registered	Agent	
		_			81	1	Name			•		
	TCH, JEFFREY	A. E			82	╁	Street Addre	ess (F	O. Box Number is Not Ac	ceptable)		~
7777 GLADES RD. SUITE 300 BOCA RATON FL 33434								<u> </u>				
				83	3							
					84	╬	City				85 Zip (Code
•] -		•			FL	• l l '_	
office or n	i trens haratzina	of Sections 607.0502 a or both, in the State of nd accept the obligation	Florida, Suc	h change was autr	iorizea di	νtr	-named corpo he corporatio	oration n's bo	n submits this statement for pard of directors. I hereby a	r the purpose of accept the appoi	changing its ntment as re	registered gistered
SIGNATURE						_			- Installand	DATE	_	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered						ent s	signature required		ADDITIONS/CHANGES TO		ID DIRECTO	DRS IN 12
12.	PDS	OFFICERS AND	DIRECTOR	DELETE	1,1 TITLE				ADDITIONO/OFFARIOLO TO	JOHN DEROTA	☐ Change	Addition
NAME		CALII .			1.2 NAME							
STREET ADDRESS	POMERANTZ, SAUL 8600 DECARIE BLVD, SUITE 200			1.3 STREET ADDRESS								
CITY-ST-ZIP	TOWN OF MOUNT ROYAL QC			1.4 CITY-ST-ZIP								
TITLE	VTD	OUT TO TAL GO		DELETE	2.1 TITLE						Change	☐ Addition
NAME	GATTINGER,	FRANKLIN I		22 NAME								
STREET ADDRESS		E, SUITE 200			2,3 STREE	ET A	ADDRESS					
CITY-ST-ZIP			2. 4 CITY-ST-ZIP									
TITLE	VSD	JOHN HOIME GO			3.1 TITLE						☐ Change	☐ Addition
NAME	POMERANTZ	TERRY			3.2 NAME]					
STREET ADDRESS		E BLVD. STE. 200			3.3 STREE	ET A	ADDRESS					
CITY-ST-ZIP		OUNT ROYAL OC H	4P2N-2		3.4. CITY-	ST-	-ZIP					
TITLE			<u> -</u>	DELETE	4.1 TITLE						Change	☐ Addition
NAME					4, 2 NAME	Ξ						İ
STREET ADDRESS		•			4.3 STREE	ET A	ADDRESS		•			

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.

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

TITLE

NAME

TITLE

NAME

Frank Gattinger SICNATURE

DELETE

DELETE

April 1/1999 Date

(514) 341-8600 Daytime Phone #

☐ Addition

☐ Addition

☐ Change

☐ Change