

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

A MENDED

PROFIT CORPORATION ANNUAL REPORT 1999



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

APPROVED AND FILED

99 APR 26 AM 10:39

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # L 68113

1. Corporation Name DILIDO INC

Principal Place of Business 3900B NE 1 AVE MIAMI, FL 33131
Mailing Address 3900B NE 1 AVE MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

3. Date In compliance or Qualified 04/24/90
4. FEI Number 65-0181051
5. Certificate of Status Document \$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
10. Name and Address of New Registered Agent

2. Principal Place of Business
21 Suite, Apt #, etc.
22 City & State
23 Zip Country
24
25
26
27
28
29
30

9. Name and Address of Current Registered Agent
MLEKUS, MASSIMILIANO
3900B NE 1 AVE
MIAMI, FL 33131

81 Name
82 Street Address (P.O. Box Numbers 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

12. OFFICERS AND DIRECTORS
SD WIENER, GRAZIA
3900B NE 1 AVE MIAMI, FL 33131
WIENER, SEYMOUR J
3900B NE 1 AVE MIAMI, FL 33131
PD
MLEKUS, MASSIMILIANO
3900B NE 1 AVE MIAMI, FL 33131

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
500002859375--9
-04/30/99--01140--011
*****61.25 *****61.25
PDS
4/21/99

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, on an attachment with an address, with all other like empowered.
SIGNATURE [Signature] DATE 4/21/99 (305) 513-1200

CR2E034 (1/1/98)