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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M53012

(4)

DFI FLORIDA, INC.

STREET ADDRESS

CITY-ST-ZIP

Principal Place	e of Business	Mailing Address	Mailing Address				4 EDOKONIA EDE DARDO NISKI BONDO NIDIO H	i i i i i i i i i i i i i i i i i i i	HOLY DIGHT DYDY	
6691 BAYMEADOW DRIVE Quen Burnie MD 21060 US		6691 BAYMEADOW DRIVE GLEM BURNIE MD 21060-6424 US								
·							Date Incorporated or Qualified 06/01/1987	1	ate of Last 22/1996	Report
· ·	lace of Business	2a. Mailing Address				4.	FEI Number			Applied For
21		26 Suite Ani # 212					74-2478978			Not Applicable
Sulte, Apt.	#. etc.	Suite, Apt. #, etc.				5.	Certificate of Status Desired	X	.	Additional Regulred
City & State	6	City & State					Election Campaign Financing			0 May Be
23		28			- 1	Trust Fund Contribution			to Fees	
Ζίρ				untry		8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30				Florida Statutes X Yes No			
	g. Name and Address of Curren	t Registered Agent	81		10.	10. Name and Address of New Registered Agent				
THE PRENTICE-HALL CORPORATION SYSTEM INC.					Name					
1201 HAYS STREET				82 Street Address			O. Box Number is Not Accept	lable)		
	E 105									
TALL	AHASSEE FL 32301	!								
•				84 City				FL	85 Zip	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the					named	corporation	submits this statement for the			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 regis agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									s registered	
SIGNATURE										
	Signature, typed or printed name of registered ager			<u></u> -	nt signature	required when		DATE	DIDECTO	NDC 141 40
12. TITLE	OFFICERS AND DIRECTORS 13. VSTD				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
NAME	EGAN, GERALD F.	C. J Diccir.			.2 NAME				L. Ondrige	
STREET ADDRESS	6 FENCE CREEK DR.			1.3 STREET ADDRESS		İ				
CITY-ST-ZIP	MADISON CT			1.4 CITY-ST-ZIP		1				
TITLE	CD			2.1 TITLE			· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
NAME			2.2 NAME							
STREET ADDRESS	2403 STILL FOREST RD	2.3		2.3 STREET ADDRESS						
CITY-ST-ZIP	BALTO MD		2.40	2.4 CITY - ST - ZIP						
TITLE	PASD	☐ DELETE	3.1 TITLE						☐ Change	Addition
NAME	CARFORA, ALFRED		3.2 NAI		ĺ	ĺ				
STREET ADDRESS			3.3 S	3.3 STREET ADDRESS						
CITY-ST-ZIP	WEST READING CT			CITY-SI	1 - ZIP				RC a	
TITLE	VPAS	∟J DELE1E	4.1 T		-	ļ ·			Change Change	Addition
NAME	REIMERDES, CARL		4 2 NAME				01.00.0.00			
STREET ADDRESS	182-14 CRYDERS LANE			1.3 STREET ADDRESS 2		20/-	OF NY 11360			
CITY-ST-ZIP TITLE	BEECHHURST NY 11357	DELETE		HY-ST	- ZIP	DHY511	DE INY 11300		Change	Addition
NAME		F Dettit	5.1 TITLE 5.2 NAME						C Sumily	had required
STREET ADDRESS					ADDRESS	1				
CITY-ST-ZIP	1			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP						
TITLE DELETE			6.1 T			 ` 			Change	Addition
NAME				IAME					_	

6.3 STREET ADDRESS

64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual roport or supplemental annual report of the 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 roceiver or trustee employered 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 appears.