

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 12 1997 8:00am
Secretary of State

DOCUMENT # **M63765** (5)
1. Corporation Name
DAMMAM INTERNATIONAL CORPORATION

Principal Place of Business
**16 N.E. 11TH WAY
DEERFIELD BEACH FL 33442**

Mailing Address
**16 N.E. 11TH WAY
DEERFIELD BEACH FL 33441-3620**



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**ANTONACCI, RAYMOND
16 N.E. 11TH WAY
DEERFIELD BEACH FL 33442**

3. Date Incorporated or Qualified
12/17/1987

3a. Date of Last Report
02/11/1996

4. FEI Number
65-0026848

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

RAYMOND ANTONACCI

82 Street Address (P.O. Box Number is Not Acceptable)

2340 N.E. 28TH CT

83

LIGHTHOUSE POINT, FL 33064

84 City

FL

85 Zip Code
33064

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

TITLE **P** ☐ DELETE
NAME **ANTONACCI, RAYMOND**
STREET ADDRESS **16 N.E. 11TH WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE **VP** ☐ DELETE
NAME **ANTONACCI, JUNE**
STREET ADDRESS **16 N.E. 11TH WAY**
CITY-ST-ZIP **DEERFIELD BEACH FL 33442**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

1.1 TITLE **PRESIDENT** ☐ Change ☐ Addition
1.2 NAME **antonacci, raymond**
1.3 STREET ADDRESS **2340 n.e 28TH CT**
1.4 CITY-ST-ZIP **LIGHTHOUSE POINT, FL. 33064**

2.1 TITLE **VPRESIDENT** ☐ Change ☐ Addition
2.2 NAME **ANTONACCI, JUNE**
2.3 STREET ADDRESS **2340 N.E. 28TH CT.**
2.4 CITY-ST-ZIP **LIGHTHOUSE POINT, FL. 33064**

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

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

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

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 a 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, changed, or on an attachment with an address.

SIGNATURE

CR2E034 (9/96)