

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90172 037 ***150.00

DOCUMENT # P02000107161

1. Entity Name
DND MAIL CORP



Principal Place of Business
12680 NW 76TH STREET
PVT
PARKLAND FL 33076

Mailing Address
12680 NW 76TH STREET
PVT
PARKLAND FL 33076

2. Principal Place of Business
151 N. NOB Hill Rd

3. Mailing Address
Suite, Apt. #, etc.

City & State
Plantation FL

City & State

4. FEI Number
04-3715641

Applied For
Not Applicable

Zip
33324

Country
USA

Zip
Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

CANTELLA, IVY J
12680 NW 76TH STREET
PVT
PARKLAND FL 33076

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Ivy Cantella*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/16/03
DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	CANTELLA, IVY J	
STREET ADDRESS	12680 NW 76TH STREET	
CITY-ST-ZIP	PARKLAND FL 33076	
TITLE	VP	<input type="checkbox"/> Delete
NAME	CANTELLA, MICHAEL E	
STREET ADDRESS	12680 NW 76TH STREET	
CITY-ST-ZIP	PARKLAND FL 33076	
TITLE	TREA	<input type="checkbox"/> Delete
NAME	ARNOLD, ALFRED	
STREET ADDRESS	79 BRIGHTON 11TH STREET	
CITY-ST-ZIP	BROOKLYN NY 11235	
TITLE	SECR	<input type="checkbox"/> Delete
NAME	ARNOLD, ALFRED	
STREET ADDRESS	79 BRIGHTON 11TH STREET	
CITY-ST-ZIP	BROOKLYN NY 11235	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *MICHAEL E CANTELLA*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/03 954 4732007
Date Daytime Phone #

CR2E034 (10/02)