

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2004 8:00 am
Secretary of State

04-16-2004 90092 041 ***150.00

DOCUMENT # P02000109046

1. Entity Name
D. H. MANAGEMENT, INC.



Principal Place of Business
**1151 COATES LANE
CUDJOE KEY, FL 33042**

Mailing Address
**1151 COATES LANE
CUDJOE KEY, FL 33042**

94053610

2. Principal Place of Business

2601 REED AVE

Suite, Apt. #, etc.

3. Mailing Address

2601 REED AVE

Suite, Apt. #, etc.

03292004

Chg-P

CR2E034 (10/03)

City & State

MELBOURNE FL

City & State

MELBOURNE FL

4. FEI Number

55-0801198

Applied For

Not Applicable

Zip

32901

Country

BREVARD

Zip

32901

Country

BREVARD

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**HANDA, DENNIS B
1151 COATES LANE
CUDJOE KEY, FL 33042**

7. Name and Address of New Registered Agent

Name **HANDA, DENNIS B**

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

2601 REED AVE

City **MELBOURNE**

FL

Zip Code

32901

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 **DENNIS B. HANDA**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/14/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **HANDA, DENNIS B**
STREET ADDRESS **1151 COATES LANE**
CITY-ST-ZIP **CUDJOE KEY, FL 33042**

TITLE **V** ☐ Delete
NAME **HANDA, DEBRA L**
STREET ADDRESS **1151 COATES LANE**
CITY-ST-ZIP **CUDJOE KEY, FL 33042**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☒ Change ☐ Addition
NAME **HANDA, DENNIS B**
STREET ADDRESS **2601 REED AVE**
CITY-ST-ZIP **MELBOURNE, FL 32901**

TITLE **V** ☒ Change ☐ Addition
NAME **HANDA, DEBRA L**
STREET ADDRESS **2601 REED AVE**
CITY-ST-ZIP **MELBOURNE, FL 32901**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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: **DENNIS B. HANDA**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/14/04

Daytime Phone #

321-F37-0316