

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2004 8:00 am
Secretary of State

02-27-2004 90017 042 ***150.00

DOCUMENT # P03000044341					
1. Entity Name DIXIE HOLDINGS, INC.					
Principal Place of Business 1621 N. DIXIE HIGHWAY POMPANO BEACH, FL 33060 1941 N. DIXIE HWY Pompano Beach, FL 33060			Mailing Address 1941 1621 N. DIXIE HIGHWAY POMPANO BEACH, FL 33060		
2. Principal Place of Business 1941 No. DIXIE Hwy Pompano Beach		3. Mailing Address 1941 N. DIXIE HWY Pompano Beach			
City & State FLORIDA		City & State FLORIDA			
Zip 33060	Country Broward	Zip 33060	Country Broward	4. FEI Number 51-0460615	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent DAWSON, BARRY 1621 N. DIXIE HIGHWAY POMPANO BEACH, FL 33060	
7. Name and Address of New Registered Agent 1941 N. DIXIE HWY Pompano Beach, FL 33060				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 Barry Dawson				DATE 2/20/04	
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D COLANGELO, ANTHONY P.O. BOX 5016 LIGHTHOUSE POINT, FL 33074	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	ALL THREE - SAME 1941 No. DIXIE HWY Pompano Beach, FL 33060	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D DEROSARIO, ANTONIO S P.O. BOX 5016 LIGHTHOUSE POINT, FL 33074	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	"	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D DAWSON, BARRY A P.O. BOX 5016 LIGHTHOUSE POINT, FL 33074	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	"	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D TOBIN, RICHARD 2929 E. COMMERCIAL BLVD., SUITE 702 FORT LAUDERDALE, FL 33308	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 or e-mail or other file information.					
SIGNATURE: Anthony Colangelo DIRECTOR 2/20/04 (954) 298-8979					