

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

FILED  
May 08 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morfitt Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P92000001110 (5)

1. Corporation Name  
D.F.D. SERVICES INC.

Principal Place of Business

2045 N.W. 183RD STREET  
MIAMI FL 33056

Mailing Address

2045 N.W. 183RD STREET  
MIAMI FL 33056-3725



3. Date Incorporated or Qualified 11/02/1992	3a. Date of Last Report 09/16/1996
4. FEI Number 65-0389808	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

DANIEL, DAVID  
2045 N.W. 183 ST.  
MIAMI FL 33056

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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 ☐ DELETE  
NAME D  
DANIEL, DAVID  
STREET ADDRESS 2045 N.W. 183 ST.  
CITY- ST- ZIP MIAMI FL 33056

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

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

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

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

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

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

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

14. I do hereby certify that the information supplied with this filing does not claim for an 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 the 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 if changed, or on an attachment to this address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/30/97 Daytime Phone: #

0142836

CR2E034 (9/96)