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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Feb 03 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200005067 (3)

DANDAR CORPORATION

Principal Place of Business

11900 BISCAYNE BLVD STE 807 MIAMI FL 33181 US 2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State			26	11900 BISCAYNE BOULEVARD STE 807 MIAMI FL 33181 US 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State				4. 5.	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/16/1992 4. FEI Number 58-2031262 5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing \$5.00 May Be							
23				28				I .		n Campa Fund Cont	-	cing				May Be Fees
Zip 24		Country 25	29		30				8. This corporation owes or has paid the current year Inlangible Personal Property Tax due June 30. Yes W No							
9. Name and Address of Current				istered Agent		81	NI.		Name	and Add	ress of N	ew Re	gistered A	gent		
GLASER, ALLAN							Nar	me								
11900 BISCAYNE BLVD. SUITE 807 MIAMI FL 33181						82	Stre	eet Address (P.	t Address (P.O. Box Number is Not Acceptable)							
						83										-
						84	City	у				····	FL	85	Zip C	ode
office or r	egistered age m f a miliar wit	ons of Sections 607, ent, or both, in the Sh, and accept the o	State of Flor Ibligations	rida. Such change of, Section 607.050	was authoriz 15, Florida St	ed by atutes	the o	med corporation corporation's but nature required when i	oard of	f directors	itement fo . I hereby	or the p accep	urpose of of the appo	changi intmer	ng its	registered egistered
12.		OFFICERS	AND DIRE		13			Α	ADDITIO	ONS/CHA	NGES TO	OFFIC	ERS AND	DIREC	TORS	IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ein, stuart d Scayne blvd. #	1807	☐ DELETI	1.2 1.3	TITLE NAME STREFT CITY-SI		FSS					[Chai	nge	Addition
TITLE				☐ DELETE	2.1	TITLE							I	Cha	nge	Addition
NAME				2.2 N												
STREET ADDRESS				2.3			addre	ESS								
CITY-ST-ZIP						CITY - S	T-ZIP			·						
TITLE				☐ DELETE		TITLE							l	Chai	nge	Addition
NAME OTROCK ADODESC						NAME	40000									
STREET ADORESS City-St-Zip						STREET CITY-S		199								
TITLE	· · ·			DELETE		TITLE	11-217				 			Cha	nge	Addition
NAME	:					NAME							•		•	
STREET ADDRESS						STREET	ADDRE:	ESS								
CITY-ST-ZIP					4.4	CITY-ST	T - ZIP									
TITLE				DELETE	5.1	TITLE				· · · · · · · · · · · · · · · · · · ·	 	•• • • • • • • • • • • • • • • • • • • •	7	Cha	nge	Addition
NAME					5.2	NAME										
STREET ADDRESS					5.3	STREET	ADDRE	ESS								
CITY-ST-ZIP						CITY-SI	T-ZIP									
TITLE				☐ DELETE	61	TITLE							[Char	nge	Addition
NAME						NAME										
STREET ADDRESS					63	STREET	ADDRE	ESS								

14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in