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

Mailing Address 2009 BIRD AVE

SUITE 124 MIAMI FL 33133-4668

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 21 1997 8:00am

Secretary of State

3a. Date of Last Report 04/03/1996

303 465-0828

3. Date Incorporated or Qualified 12/02/1992

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200008648 (7)

DENNIS BURCHELL, INC.

Principal Place of Business

SIGNATURE:

2809 BIRD AVE SUITE 124

MIAMI FL 33133

2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For	
21		26	26		65-0378949	Not Applicable	
Suite, Apt	uite, Apt #, etc. Suite, Apt		ot. <b>#, etc</b> .		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 28		City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip			Countr	y	8. This corporation has liability for intangit	······································	
24	25 29 30		30	Florida Statutes X Yes 💢 No			
g. Name and Address of Current Registered Agent				<del></del>	10. Name and Address of New Registers	d Agent	
MATUN, BRIAN				81 Name			
2809 BIRD AVE #124 MIAMI FL 33133							
				82 Street Address (P.O. Box Number is Not Acceptable)			
MICHAIL DO TOO				,			
				City	F	<del></del>	
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-na					oration 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	Significal typed or printed name of registe	red agent and title if applicable.	(NOTE: Registered Ap	ent signature require	ed when reinstaling) DATE	***************************************	
12.	OFFICER	S AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12	
TILLE	D	DELETE	1,1 TITLE			Change Addition	
NAME	BURCHELL, DENNIS		1.2 NAME				
STREET ADDRESS	ss 2809 BIRD AVE., #124			T ADDRESS			
City St 7iP	MIAMI FL		1.4 CITY-	ST-ZIP			
THE	Р	DELETE	2.1 TITLE			Change Addition	
NAMÉ	BURCHELL, BETTY		2.2 NAME	ł .			
STREET ADDRESS	2809 BIRD AVE., #124			T ADDRESS .			
CHY-ST-7IP	MIAMI FL		2. 4 City		1 · · · · · · · · · · · · · · · · · · ·		
TITLE		DELETE	3.1 TITLE		······································	☐ Change ☐ Addition	
NAME			3.2 NAME		•		
STREET ADDRESS				T ADDRESS			
Erty-ST-7iP			3.4. CITY	1			
TITLE		DELETE	4.1 TITLE			Change Addition	
NAME		,	4. 2 NAM	ľ	•		
				T ADDRESS			
STREET ADDRESS							
CHY-ST-7IP TITLE		DELETE	4.4 CITY- 5.1 TITLE	\$1-ZIP		Change Addition	
		<u> </u>	5.2 NAME	.		First Annual First Security 1	
NAME				T ADDRESS			
STREET ADDRESS							
CITY+ST-ZIP	1.00.4.00.4.00.4.00.4.00.4.00.4.00.4.00	DELETE	5.4 CITY - 6.1 TITLE	91-XII.		Change Addition	
TITLE		ب مدداد				First Australia First Location	
NAME			6.2 NAME	1			
STREET ADDRESS				T ADDRESS			
C(1Y-S1-ZIF	his partification that information as	realized with this filing does and	6.4 CITY		Lin Contine 110 07/3Vi) Florida Statutos 1 km	her certify that the	
14. I do 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 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 18 Mehanged, or on an attachment with an address.							
appears in Block 12 or Nigot 18 Mehanged, or on an attackment with an address.							