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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name

P93000018742 (5)

DOMIRE INVESTMENT ENTERPRISES, INC.

Principal Place of Business Mailing Address 451 S 12TH AVE 451 SW 12TH AVE POMPANO BEACH FL 33069 POMPANO BEACH FL 33069 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>03/11/1993</u> 4 FFI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0409291 26 21 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Zip Country 8. This corporation owes or has paid the current year Intangible Country Zio Personal Property Tax due June 30. 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name FLORA, MICHAEL J 451 SW 12TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH FL 33069 83 84 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change Addition 1.1 TITLE TITLE FLORA, MICHAEL J 1.2 NAME NAME 1400 SW 1ST CT STREET ADDRESS 1.3 STREET ADDRESS POMPANO BEACH FL 33069 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE FLORA, JOHN A 2.2 NAME NAME 1400 SW 1ST CT 2.3 STREET ADDRESS STREET ADDRESS POMPANO BEACH FL 33069 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition ■ DELETE 3.1 TITLE ☐ Change TITLE MUSSO, ANTHONY 3.2 NAME NAME STREET ADDRESS 1400 SW 1ST CT 3.3 STREET ADDRESS POMPANO BEACH FL 33069 3.4. CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP Change Addition DELETE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 61 TITLE ☐ Change Addition TITLE 6.2 NAME NAME

14. 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 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 employered 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 with an articles.

6.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

FILED

Mar 24 1998 8:00am

Secretary of State

3/12/98/954)