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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Apr 29 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000028821 (5)

D.L. LIPP, INC.

SIGNATURE:

Principal Place of Business Mailing Address 1059-A SW 1ST WAY P O BOX 5852 DEERFIELD BCH FL 33441 LIGHTHOUSE POINTE FL 33074-5652 3a. Date of Last Report 3. Date Incorporated or Qualified 04/20/1993 02/07/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 26 1059 - Su 65-0406514 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing DERRIGIO 23 Trust Fund Contribution Added to Fees $Z_{\rm IP}$ Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name THOMPSON, RUSSELL ESQUIRE 1341 NEWPORT CENTER DRIVE, WEST 82 Street Address (P.O. Box Number is Not Acceptable) DEERFIELD BEACH FL 33442 83 84 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 1 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE and of registered age valid title if applicable OFFICERS AND/DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition 1.1 TITLE Hitt LIPP, DWAYNE L NAME 1.2 NAME 2010 NE 30TH CT 1.3 STREET ADDRESS STREET ADDRESS LIGHTHOUSE POINTE FL 33064 1.4 CITY - ST-ZIP CDY-S1-ZiP DELETE 2.1 TITLE Change Addition TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADORESS CITY - \$1 - ZiP 2.4 CITY-ST-ZIP DELETE Change Addition THUE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS C-TY - ST- 7/P 3.4. CITY - ST - ZIP ■ DELETE Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIE 4.4 CITY - ST - ZIP DELETE Change Addition THE 5.1 TITLE 5.2 NAME MAMI STREET ADDRESS **5.3 STREET ADDRESS** CITY-SE-762 54 CITY-ST-ZIP DELETE Change Addition 1361 61 TITLE NAM 6.2 NAME STREET ADDRESS 6.3 STREET ADORESS 6.4 CiTY-ST-ZIP 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 securate and that my signature shall have the same legal effect as if made under oath; that I am an officer or d rector of the corporation or the receiver or truster 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 with an address.