FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLOR:DA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

P93000044795 (1)

D'N T DAIRY, INC.

	DAIRTI INO								
Principal Place of	of Business	Mailing Address					20111 90111 91911		
3655 BROOKL LAKE WORTH	(LYN LANE H FL 33461								
						3. Date incorporated or Qualified 06/21/1993	3a. Date o	of Last 01/1 9	
2. Principal Place of Business		2a. Maiting Address			4. FEI Number	2.4		Applied For	
1		26			65-0425251			Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional Required	
City & State		City & State	F			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry		8. This corporation has liability for		under	s 199.032.
24	25	29	30			Rorida Statutes Yes No			
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Registered Agent			
				81	Name				
BERNST	EIN, ALAN		82 Street Addr		ess (P.O. Box Number is Not Accepta	ble)			
	Keechobee Blvd.								
WEST P.	ALM BEACH FL 33417			83					
,	•			84	City		CI	85	Zip Code
			60.1			tion or known this stateging for the or	rryose of cha	LLL ogino it	s registered office
or rogietari	to the provisions of Sections 607, and agent, or both, in the State of th, and accept the obligations of	Elonda, Such charge was	authorized by the c		amed corpor ration's boa	ation submits this statement for the pure of directors. Thereby accept the app	rpose of cha pointment as	T T nging it: register	s registered offic ed agent. I am
or register familiar wit	ed agent, or both, in the State of th, and accept the obligations of,	Florida Such change was Section 607.0505, Florida	authorized by the C Statutes.	we na corpo	ration's boa	G Of threatens. Thereby accept the ep-	SOI KITICITE US	nging it: register	s registered office ed agent. I am
or register familiar wit SIGNATURE	ed agent, or both, in the State of th, and accept the obligations of. Signature, type for people treate of repotense.	Florida Scott change was Section 607.0505, Florida	authorized by the C Statutes.	we na corpo	ration's boa	ation submits this statement for the pured of directors. I hereby accept the application of the control of the	DATE		
or registed familiar with SIGNATURE	ad agent, or both, in the State of th, and accept the obligations of. Signal re, but for point treate of the both OFFICER:	Florida Such change was Section 607.0505, Florida	Statutes. PAOTE TA STEECE 13.	eve na corpo	ration's boa	Teachers and	DATE FICERS AND		TORS IN 12
or registed familiar with SIGNATURE	ad agent, or both, in the State of th, and accept the obligations of Supartine, but the pentil treats of the Pentil OFFICER: D	Florida Sajon change was Section 607.0505, Florida Hayeman of Agel Alli S AND DIFFECTORIS	Statutes. PAOTE TA STEECE 13.	eve na corpo	ration's boa	Teachers and	DATE FICERS AND	DIRFC	TORS IN 12
or registes familiar wit SIGNATURE	ad agent, or both, in the State of th, and accept the obligations of Signature, but the pent trial of the beautiful DHARRELL, ALVIN D	Florida Sajon change was Section 607.0505, Florida Hayeman of Agel Alli S AND DIFFECTORIS	exone 76 graved 113.	AME	ration's boa	Teachers and	DATE FICERS AND	DIRFC	TORS IN 12
or registed familiar with SIGNATURE	and agent, or both, in the State of th, and accept the obligations of Signature, the first period treats of the both OFFICERS D HARRELL, ALVIN D 3655 BROOKLYN LANE	Florida Sajon change was Section 607.0505, Florida Hayeman of Agel Alli S AND DIFFECTORIS	Note Projected	AME	sgraf in royan	Teachers and	DATE FICERS AND	DIRFC	TORS IN 12
or registes familiar wit SIGNATURE 12. TITLE NAME	pd agent, or both, in the State of the and accept the obligations of OFFICER: D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461	Florida Sucri change was Section 607.0505, Florida Layer and Confused diff SI AND DIRECTORS	### Action 2016 12 Ac	I Age of the Fig. 114 - S1	sgraf in royan	Teachers and	DATE FICERS AND	DIRFC	TÖRS IN 12 e Addition
or registed familiar with SIGNATURE	D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461	Florida Sajon change was Section 607.0505, Florida Hayeman of Agel Alli S AND DIFFECTORIS	### Action 2016 12 Ac	HARREST THEFT	sgraf in royan	Teachers and	DATE FICERS AND	DIREC] Chang	TÖRS IN 12 e Addition
or registed familiar with SIGNATURE	D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461 D CAREELL, TERESA H	Florida Sucri change was Section 607.0505, Florida Layer and Confused diff SI AND DIRECTORS	13. 1 1 1 1 1 1 1 1 1	I Age of The AME ITY - ST	sgraf in royan	Teachers and	DATE FICERS AND	DIREC] Chang	TÖRS IN 12 e Addition
or registed familiar with SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS	D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461	Florida Sucri change was Section 607.0505, Florida Layer and Confused diff SI AND DIRECTORS	### Content of the Co	NVE DATE OF THE PROPERTY OF T	apper or count	ADDITIONS/CHANGES TO OF	DATE FICERS AND E	DIREC] Chang	TORS IN 12 e Addition e Addition
or registed familiar with SIGNATURE. 12. TITLE NAME STREET ACORESS CITY - S1 - ZIP 11TLE NAME	D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461 D HARRELL, TERESA H 3655 BROOKLYN LANE LAKE WORTH FL 33461 D HARRELL, TERESA H 3655 BROOKLYN LANE LAKE WORTH FL 33461	Florida Stitic change was Section 607.0505, Florida 1 AND DIFFECTORS DEL Vice. Page 1081	### Content of the Co	NVE DATE OF THE PROPERTY OF T	apper or count	ADDITIONS/CHANGES TO OF	DATE FICERS AND E	DIREC] Chang	TÖRS IN 12 e Addition pe Addition
or registed familiar with SIGNATURE. 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP LITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRELL, ALVIN D 3655 BROOKLYN LANE LAKE WORTH FL 33461 D HARRELL, TERESA H 3655 BROOKLYN LANE	Florida Skith change was Section 607.0505, Florida 1.00 AND DIFFECTORS DEL V.e. Pars DEL	### Content of the Co	NVE DATE OF THE PROPERTY OF T	apper or count	Teachers and	DATE FICERS AND E	DIREC] Chang	TORS IN 12 e Addition e Addition

64 CITY-ST-ZIP

14. If do hereby, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k): Fforida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same logal effect as if made under cath; 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 with an address

3.4 CHY-ST-2IP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

4.4 CITY - ST - ZIP

4 1 11i1 F

4.2 NAMÉ

5 1 FILE

6 111116

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

City-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

TITLE

speenacres, H

Janua Harrell
GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

TERESA HARREIL

Mrsen acres

7000010005; -05/06/96--01013--011

***200.00

4/96 9147-7579

☐ Change ☐ Addition

Addition

Addition

CR2E034 (12/95)