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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P93000051197 (0)

DANROE	3 CORPORATION					
Principal Piace 255 W. 24TH S SUITE 202 MIAMI BEACH	ST.	Mailing Address 255 W. 24TH ST. SUITE 202 MIAMI BEACH FL 33140-462	26			
				÷		e of Last Report 8/1996
	lace of Business	2a. Mailing Address			4. FEI Number 65-0425369	Applied For
Suite, Apt	#, elc.	Suite, Apt. #, etc.				Not Applicable \$8.75 Additional
22	'	27			5. Certificate of Status Desired	Fee Required
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be
23	Country	28	Country		Trust Fund Contribution 8, This corporation has liability for intangible to	Added to Fees
24	25	29	30		Florida Statutes Yes	No
	g. Name and Address of Currer	nt Registered Agent	81	Name	10. Name and Address of New Registered A	gent
	ily, daniel a W. 24th St.			Name		/P-1
	TE 202		82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
1	MI BEACH FL 33140		83			
			84	City	P** [85 Zip Code
11 Pursuant	to the provisions of Sections 607 050	02 and 607 1508. Florida Statute	s the above	-named co	FL orporation submits this statement for the purpose of a	changing its registered
SIGNATURE.	egistered agent, or both, in the State in familiar with, and accept the oblig Signature, typed or printed name of registered age				orporation submits this statement for the purpose of cration's board of directors. I hereby accept the appo	intment as registered
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	
THLE	PS NECLY DANIEL A	DELETE	1.1 TITLE			Change Addition
NAME STREET ADDRESS	NEELY, DANIEL A 255 W. 24TH ST. #202		1.2 NAME 1.3 STREET	ADDDCCC		
CITY-ST-ZIP	MIAMI BEACH FL		1,4 CITY-5	Ť		
TILE	M	DELETE	2.1 TITLE			Change Addition
NAME	SCULLY, ROBERT M		2.2 NAME			
STREET ADDRESS	255 W. 24TH ST. #202 MIAMI BEACH FL 33140		2.3 STREET	1		
CITY-S1-7P	mover Denotife 30170	DELETE	2 4 CITY-S 3 1 TITLE	1 - ZIP		☐ Change ☐ Addition
NAME		" •	32 NAME]	•	
STREET ADDRESS			3.3 STREET	ADDRESS		
CITY-ST-ZIP	COLUMN TO THE	LIbraria	3.4. CITY - 5	ST-ZIP	· · · · · · · · · · · · · · · · · · ·	Channa
10TLF		DELETE	4.1 TITLE 4. 2 NAME		· ·	Change Addition
NAME STREET ADORESS			4.3 STREET	ADDRESS		
City-S1-ZIP			4.4 CITY-S	l.		
TOTLE		DELETE	5 1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET		•	
CHY-S1-ZIP THE		DELETE	5.4 CITY - S 6.1 THILE	I-ZiP		Change Addition
NAME		Bassad are now as a war	6.2 NAME		•	and some property of the state
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIF			64 CITY-S			

SIGNATURE;

appears in Block 12 or [

UN AND TYPED OR PRINTED NAME OF SIGNING OF

BANELA. NEELY

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 enough 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 certification or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

2/18/97 305-538-1000

FILED

Feb 24 1997 8:00am

Secretary of State