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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000066047 (0)

DD-NACK ENTERPRISES, INC.

Principal Place of Business Mailing Address 4900 LEITNER DRIVE WEST 4900 LEITNER DRIVE WEST CORAL SPRINGS FL 33067 CORAL SPRINGS FL 330				- INDIVIDUE NAM TOLOGO NINIT ODNIH ODNIH ODNIH ONNIH ODNIH ONNIH ODNIH ONNIH ODNIH ONNIH ODNIH ONNIH ODNIH ONNIH			
					3. Date Incorporated or Qualified 09/22/1993	3a. Date of 04	Last Report /25/1995
26		2a. Mailing Address			OF 0440030		Applied Fo
		26					Not Applica
Suite, Apt. #	f, etc.	Suite, Apt #, etc.			5. Certificate of Status Desired		8.75 Additiona Fee Required
City & State		Oity & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Co	untry	8. This corporation has liability for		nders 199.032,
14	25	29	30		Florida Statutes 🔀 Yes		
g, Name and Address of Current Registered Agent				81 Name	10. Name and Address of New Registered Agent		
801 BR CORAL 11. Pursuant to or registere	V LEITNER DR NCKELL AVENUE 24TH FLOO . SPRING FL 33067 of the provisions of Sections 607.05 ad agent, or both, in the State of File h, and accept the obligations of, Se	02 and 607.1508, Florida Stat orida Such change was autho	inzed by the	83 84 City ove named corpor corporation's boar	ration submits this statement for the pur rd of directors. Thereby accept the appr	PL	Zip Code ring its registered d istered agent. Lai
	Signature, typed or printed home of registered ag			al Agent signature require		ĐA' E	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF		
TITLE	PT	DELETE	1 1	TITLE			nange 🔲 Addit
NAME	LYONNAIS, DANIEL		121	NAME			
STREET ADDRESS	4900 W. LEITNER		133	STREET ADDRESS			
CITY - ST - ZIP	CORAL SPRINGS FL	Florer		DiTY-ST-ZIP			
TITLE	VS	DELETE		T.TLE			thange 🔲 Addit
NAME	LYONNAIL, DEBRA ANN		2.21	NAME			
STREET ADDRESS	4900 W. LEITNER		23	STREET ADDRESS			
CITY - ST - ZIP	CORAL SPRINGS FL			OITY - ST - ZIP			
TITLE		☐ DELETE	. 31	TITLE			inange 🔲 Addit
NAME			321	NAME			
STREET ADDRESS			3 3	STREET ADORESS			
CITY - ST - ZIP			346	CITY - ST - ZIP			

64 CHY-S1-ZP 14. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 13 if at with an address.

4 1 Tille

4.2 NAME

5 1 THLE

5.2 NAME

6 1 TITL€

6.2 NAME

4.3 STREET ADDRESS

5 3 STREET ADDRESS 5 4 CHTY - ST - ZIP

6.3 STREET ADDRESS

4.4 CITY ST-ZIP

SIGNATURE:

TITLE

NAME

TITLE

NAME

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIF TITLE

CITY-ST-ZIF

SIGNORE AND THE OF PRINTED AME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

DELETE

DANIEL LYONNALL 4.26.96

Change Addition

☐ Change ☐ Addition

Addition

Change