2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Sep 21, 2004 8:00 am Secretary of State DOCUMENT # P93000069599 1. Entity Name 09-21-2004 90001 044 ***150.00 DAHMO ENTERPRISES, INC. Principal Place of Business Mailing Address 1057 BROWARD RD PO BOX 28145 JACKSONVILLE FL 32218 JAKSONVILLE FL 32226 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E034 (4/04) City & State City & State 4. FE! Number Applied For 59-3211860 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name -LIAN: FRANKLIN Street Address (P.O. Box Number is Not Acceptable) 1057 BROWARD RD JACKSONVILLE FL 32218 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 9. Election Campaign Financing \$5.00 May Be DUE BY September 8, 2004 late fee. By checking this box, the corporation certifies it Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State did not receive prior notice. Fee to file is \$150.00. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change ■ Addition NAME FRANKLIN, LIAN NAME 1057 BROWARD RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL CITY-ST-ZIP Delete TITLE ☐ Addition Please note: Business Closed on 7/17/2003 for Repair. (Condemned by City of Jacksonville.). STREET ADDRESS STREET ADDR CITY-ST-ZIP CITY-ST-ZIP TITLE Delete DTLE NAME NAME STREET ADDRESS STREET ADDR CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Addition NAME STREET ADDRESS STREET ADDR Just Re-opened Recently. CITY-ST-ZIP CITY-ST-ZIP ■ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRI CITY-ST-ZIP CITY-ST-ZIP TIT) F ☐ Delete Addition TITLE NAME NAME STREET ADDRESS STREET ADDRE CITY-ST-ZIP CITY-ST-ZIP 12. 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 report or supplemental 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 10 or Block 11 if

FILED

changed, or on an attachment with an address, with all other like empowered Sep. 8, 2004 904-757-0990

Date Daytime Phone # **SIGNATURE:**

CITY OF JACKSONVILLE, FLORIDA PROPERTY SAFETY DIVISION BY ORDER OF

This structure is UNSAFE AND UNFIT FOR HUMAN HABITATION and subject to demolition

pursuant to notice and order from the City of Jacksonville, Neighborhoods Department, Property Safety Division. It is unlawful to mutilate or remove this notice until such notice and order is complied with. The owner is subject to prosecution for failure to comply with such notice and order.

THIS BUILDING IS SUBJECT TO DEMOLITION

HUMAN HABITATION PROHIBITED

This order posted under authority of Chapter 518 of the Jacksonville Municipal Code

ENTER -- IT IS UNLAWFUL FOR THIS PROPERTY TO BE OCCUPIED

Property Owner is required to bring this property into combliance. Notify the Property Safety Division when work is being performed.

057 FROWERP S

ite Posted

7-10-03

632-5569 Posted by order of the Chief of Property Safety 630-1212 EXT 3808

Code Enforcement Officer

630-1212 EXT

MUTILATION OR REMOVAL OF THIS PLACARD IS UNLAWFUL AND PUNISHABLE

BY FINE AND / OR IMPRISONMENT