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

CORPORATION ANNUAL REPORT 1998 DOCUMENT # Principal Place of Business

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State P93000076642 (6) THE DASCH GROUP, INC. Mailing Address 1027 NW 132 COURT THE DASCH GOULD: INC. 1027 NW 132 COURT MIAMI FL 33182 DO NOT WRITE IN THIS SPACE MIAMI FL 33182 us 3. Date Incorporated or Qualified 11/01/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 10442 N.W. 31 TERRACE 26 65-0450150 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing FLOUIDA MIAMI 23 28 Trust Fund Contribution Added to Fees Country Ζip Country 8. This corporation owes or has paid the current year Intangible 33172 USA 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SEGOVIA, JAIME SEGOVIA JAIME Street Address (P.O. Box Number is Not Acceptable) 2247 SW 105 CT 82 **MIAMI FL 33165** 83 84 CityMIAMI Zip Code 33182 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. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the appointment as registered agent. SIGNATURE Signature, typed or pr ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change DELETE Addition TITLE PS 1.1 TITLE SEGOVIA, JAIME E034 NAME 1.2 NAME 1027 NW 132 COURT STREET ADDRESS 1.3 STREET ADDRESS 33182 MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP **DELETE** 3.1 TITLE Change \_\_\_ Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - Z#P 3.4. CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 5.4 City-St-ZiP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME **62 NAME** 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP

filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information all report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an outside empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the information supplied with this indicated on this annual report or supplemental annu-officer or director of the corporation or the receiver of Block 12 or Block 13 if changed, or on an attachment

SIGNATURE:

EQUIRED

01/05/98

301-640-2383

**FILED** 

Jan 21 1998 8:00am