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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000003135 (8) **DOCUMENT #** 

DATTINI PROPERTIES, INC.

Principal Place of Business	
8387 PINES BLVD	

Mailing Address

## **FILED** Jan 27 1998 8:00am Secretary of State



8387 PINES BLVD PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 DO NOT WRITE IN THIS SPACE Date Incorporated or Qualified 01/06/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 8377 Pines Blvd. 8377 Pines Blvd. 65-0456649 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required City & State City & State Election Campaign Financing \$5.00 May Be Pembroke Pines, FL. Pembroke Pines,FL Trust Fund Contribution Added to Fees Country Country This corporation owes or has paid the current year intangible 25 USA 33024 30 U.S.A Personal Property Tax due June 30. ☐ Yes □ No 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent DATTINI. GEORGINA Dattini, Georgina
Street Address (P.O. Box Number is Not Acceptable)
8377 Pines Blvd. 8387 PINES BLVD 82 PEMBROKE PINES FL 33024 83 <sup>City</sup> Pembroke Pines 33024 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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

SIGNATURE (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE 1.1 TITLE Addition TITLE Change Owner DATTINI, GEORGINA 1.2 NAME NAME Dattini, Georgina **72E034** 8387 PINES BLVD STREET ADDRESS 1.3 STREET ADDRESS 8377 Pines Blvd. PEMBROKE PINES FL 33024 CITY - ST - ZIP 1.4 CITY-ST-ZIP Pembroka Pines, DELETE Addition Change TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CMY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE \_\_ Change ■ Addition TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DE! FTE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY - ST - ZIP DELETE \_\_\_ Change Addition TITLE 6.1 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Secindicated on this annual report or supplemental annual report is true and accurate and that my signature sofficer or director of the corporation or the receiver or trustee empowered to execute this report as required Block 12 or Block 13 if changed, or on an attachment with an address.

on 119.07(3)(i), Florida Statutes. I further certify that the information all have the same legal effect as if made under oath; that I am an by Chapter 607, Florida Statutes; and that my name appears in

436-3811

SIGNATURE: