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FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P94000006161 (1)**

1. Corporation Name
D. GRAPHOS, INC.

Principal Place of Business

Mailing Address

% MICHAEL W. HAWKINS, CPA
330 S PINEAPPLE AVE SUITE 106
SARASOTA FL 34236-6773

% MICHAEL W. HAWKINS, CPA
330 S PINEAPPLE AVE SUITE 106
SARASOTA FL 34236-6773

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/26/1994

4. FEI Number

65-0475072

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION COMPANY OF MIAMI
201 S BISCAYNE BLVD
1600 MIAMI CENTER
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
D
PARDON, LUIS F
STREET ADDRESS
TORRE HENER, PISO 6, EL ROSAL
CITY-ST-ZIP
CARACAS, VENEZUELA

TITLE ☒ DELETE

NAME
D
PARDON, LUIS F
STREET ADDRESS
TORRE HENER, PISO 6, EL ROSAL
CITY-ST-ZIP
CARACAS, VENEZUELA

TITLE ☒ DELETE

NAME
D
PARDON, JOSE A
STREET ADDRESS
TORRE HENER, PISO 6, EL ROSAL
CITY-ST-ZIP
CARACAS, VENEZUELA

TITLE ☒ DELETE

NAME
D
NUNEZ, ANDRES E
STREET ADDRESS
TORRE HENER, PISO 6, EL ROSAL
CITY-ST-ZIP
CARACAS, VENEZUELA

TITLE ☒ DELETE

NAME
D
DE LA ROSA, GUILLERMO
STREET ADDRESS
TORRE HENER, PISO 6, EL ROSAL
CITY-ST-ZIP
CARACAS, VENEZUELA

TITLE ☐ DELETE

NAME
Director
THOMAS FEHR
STREET ADDRESS
6002 31ST E
CITY-ST-ZIP
Bradenton FL 34203

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 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; that 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 changed, or on an attachment with an address.

SIGNATURE: *Thomas Fehr* Thomas Fehr Director 4-2-98 941-751-2324

CR2E034 (10/97)