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

P94000016608 (9)

DOCUMENT #

1. Corporation Name

SIGNATURE:

DANAL DEVELOPMENT CORP.

Principal Place of Business N

Mailing Address

FILED May 01 1996 8:00 am Secretary of State



Daytinie Phone #

1290 WESTO SUITE 244 FT. LAUDER(N RD. Dale fl 33326	1290 WESTON RD. SUITE 2214 FT. LAUDERDALE FL 33	1326	3. Date Incorporated or Qualified 03/02/1994	3a. Date of Last Report 04/17/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4, FEI Number 65-0472151	Applied For
Suite, Apt. #	f ata	26 Suite Act # etc		00 0412 101	Not Applicable
22 /346.	5 NW 8 Street	Suite, Apt. #, etc. 27 /3465 N	w 8 stie	ef 5. Certificate of Status Desired	□ \$8.75 Additional Fee Required
23 Plan	ntation PL	28 Plantat		Election Campaign Financing Trust Fund Contribution	S \$5.00 May Be Added to Fees
24 333 <i>3</i>	25 25 Broward	2033325	Country 30 Brower	8. This corporation has liability for Florida Statutes	intangible tax under s 199.032, ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New F	tegistered Agent
			81 Name		
LEGAL INFORMATION SERVICES, INC. 1290 WESTON RD. 82 Street Add			dress (P.O. Box Number is Not Acceptable)		
	estun rd. 14 <i>30</i>0		63		
	DERDALE FL 33326				
TT. LAU	DELIDATE I E 00020		84 City		FL 85 Zip Gode
or registere familiar with	o the provisions of Sections 607.0502 ad agent, or both, in the State of Florid h, and accept the obligations of, Section	a. Such change was authorized	the above-named cord by the corporation's t	poration submits this statement for the purposerd of directors. I hereby accept the app	pose of changing its registered office ointment as registered agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE	Registered Agent signature re-	quired when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	PVTS	☐ DELETE	1 1 TITLE	PVTS	☐ Change ☐ Addition
NAME	MIZRAHI, DAVID		1.2 NAME	Mizrahi', David	1
STREET ADDRESS	1290 WESTON RD., SUITE 21	4	1.3 STREET ADDRESS	13465 NW 8th.	57.
CITY - ST - ZIP	FT. LAUDERDALE FL 33326		1.4 CHTY-ST-ZIP	Plantation, FC	33325
TITLE	D	DELETE	2 1 TITLE	Dueis, Rober to L 13445 MW 872 St	☐ Chang∃ ☐ Addition
NAME	WEIS, ROBERTO L		2 2 NAME	weis, Kober to L	_
STREET ADDRESS	1290 WESTON RD., SUITE 21	4	2.3 STREET ADDRESS	13445 MU 872 ST	eet
CITY - ST - ZIP	FT. LAUDERDALE FL 33326		2.4 CITY - ST - ZIP	Plantation, & 3	3323
TITLE		☐ DELETE	3. 1 TITLE	,	☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
Crity-St-ZiP Title		[] DELETE	3 4 D/TY - ST - ZIP 4. 1 TITLE		Change Addition
NAME			4. 1 THE 4.2 NAME		Change Change
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 City - St - Zip		
10LF		DELETE	5. 1 THILE		Change
NAME		_	5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-SF-ZIP			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do hereby	certify that the information supplied w	ith this filing is voluntarily furnis	hed and does not quali	fy for the exemption stated in Section 119. Surate and that my signature shall have the	07(3)(k), Florida Statutes. I further