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Apr 22, 1999 8:00 am
Secretary of State

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PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000018999 ^{6K}

1. Corporation Name

DENWAY ENTERPRISES, INC.

Principal Place of Business

Mailing Address

4281 Coral Springs Dr
Coral Springs FL 33065

4281 Coral Springs
Drive
Coral Springs FL 33065

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/10/94

2. Principal Place of Business

21 4281 Coral Springs Dr

2a. Mailing Address

26 4281 Coral Springs Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Coral Springs FL

City & State

28 Coral Springs FL

Zip

24 33065

Country

25 USA

Zip

29 33065

Country

30 USA

4. FEI Number

65-0479569

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 the current year Intangible
Personal Property Tax.

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Patron, Dennis J.
4281 Coral Springs DR
Coral Springs, FL 33065

81 Name

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

4281 Coral Springs Drive

83

84 City

Coral Springs.

FL

85 Zip Code

33065

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

TITLE D
NAME Dennis Patron
STREET ADDRESS 406 Lakeside Dr Ste 111
CITY-ST-ZIP Margate, FL

TITLE D
NAME Bulman, A. Wayne
STREET ADDRESS 280 NW 118th Ave
CITY-ST-ZIP Coral Springs FL 33071

TITLE D
NAME Bulman, Sandra
STREET ADDRESS 280 NW 118th Ave
CITY-ST-ZIP Coral Springs FL 33071

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D
1.2 NAME Dennis Patron
1.3 STREET ADDRESS 4281 Coral Springs Drive
1.4 CITY-ST-ZIP Coral Springs, FL 33065

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 or 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, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)