PŘOFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris .

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P94000040217

DBK REALTY MANAGEMENT CORP.

DRK HEALLT	WANAGEWENT COM	•							
Principal Place of Busin	ness	Mailing Address							•
7231 SOUTHERN BLVD		7231 SOUTHERN BLVD			-				
C-2		C-2 WEST PALM BEACH FL 3	2413			DO NOT WR	ITE IN THIS	SPACE	
WEST PALM BEACH FL	33413	WEST PALM BEACH IE S	UT10	•	3. Date	Incorporated or Qualifed		में हैं सु	
		·				24/1994	· <u></u>	Apr	lied For
2. Principal Place of B		2a. Mailing Address			4. FELN	T APPLICABLE	. /	<u> </u>	Applicable
21		Suite, Apt. #, etc.						\$8.75 A	
Suite, Apt. #, etc.		—			5. Certif	fcate of Status Desired	<u></u>	Fee Red	uired
22		City & State			6. Elect	tion Campaign Financing		\$5.00	
City & State	<u></u>	28			Trust	t Fund Contribution	<u></u>	Added to	Fees
23	Country	Zip	Coun	try	8. This	corporation owes the cu	rrent year Inta	ingible	Ì
Zip 	' ` }	29	30		Pers	onal Property Tax.	<u> </u>		□No
24	25		- 		10. Nam	ne and Address of New	Registered /	Agent	
<u>9. N</u>	ame and Address of Current			B1 Name				:	.
GROVES, H	KENNETH L		-	82 Street A	Address (P.O. B	Box Number is Not Accep	table)		
14831-DRA	AFTHORSÉ L'ANE		ļ	Succes	100,000 (1.0.2	Long to the control of the	48.34.85 1 <u>255 5</u>	141, c+ 4 (52)	. 1, 104(124)
	M BEACH FL 33413		Ī	83					
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				84 City			FL	. 1	
11. Pursuant to the p	provisions of Sections 607.0502 a ed agent, or both, in the State of I	nd 607.1508, Florida Stati Florida Such change was	utes, the at	ove-named of by the corpo	corporation sub pration's board o	omits this statement for the of directors. I hereby acc	ept the appoi	ntment as re	gistered
office or registere agent. I am famil	e. typed or printed name of registered agent ar	ns of, Section 607.0505, F	lorida Statu	tes.	equired when reinstati	ing)	DATE		1989; 1 15 D
office or registers agent. I am famili SIGNATURE	iar with, and accept the obligation	ns of, Section 607.0505, F ind title if applicable. (NO DIRECTORS	TE: Registered	tes. Agent signature re	equired when reinstati	ing). ITIONS/CHANGES TO C	DATE	ID DIRECTO	1989; 1 15 D
office or registere agent. I am famil	e. typed or printed name of registered agent ar	ns of, Section 607.0505, F	TE: Registered 13.	tes. Agent signature re	equired when reinstati	ing)	DATE		PRS IN 12
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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

FILED

Jan 28, 1999 8:00am

Secretary of State

01-28-1999 90009 023 ***158.75