FILED

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90006 014 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000041196**

1. Corporation Name

D & LI HAI IMITED

MULIMITED, INC.									
e of Business	Mailing Address	<u> </u>		——j	1 18811881		ODIN OBIN ODI		SMTIM MINE COM
	- 4			1					
o nu.	#121	no.		1					
#121 #121 COOPER CITY FL 33026 COOPER CITY FL 33026		L 33026			DO NOT WRITE IN THIS SPACE				
							d		
					.05/27/199	4			
tace of Business	2a. Mailing Add	ress			4. FEI Number	_		Ap	plied For
	26				65-049143	9			t Applicable
#, etc.	Suite, Apt. #	, etc.			5. Certificate of	Status Desired			
, .	27								
(e	City & State	,					9 🗆	-	
	28								o Fees
Country			try		•		irrent year		□No
25							. Da elekses	_ <u>/~</u>	<u> </u>
9. Name and Addres	ss of Current Registered Agent		04 Name		10. Name and A	daress of New	Registere	a Agent	
IAMIN HAROLD C		ľ	oi Name	ላርሽ`	INIE 5	· MIC	LER	CPA	
		1	82 Stree	t Addres	s (P.O. Box Numb	er is Not Accer	otable)		
		ļ.,				1.47			
WINTE SOUZS		3	83	1000	ZI BIN'	25 B	LV の	-50178	212
		1	B4 City	0/2	200 000	0.000		85 Zip (
***				<u> 1211</u>	beer	, 411VE	<u>> r</u>	<u> </u>	<i>3</i> 27
	~~~ CO7 OCO2 ~~~ CO7 1500 Elor						ie numose	or changing its	registereu j
to the provisions of Sections to the provisions of Sections	the State of Florida Such char	noa Statutes, the abt	ove-named by the con	poration:	ation submits this s board of directo	s. I hereby acc	ept the app	ointment as re	gistered
to the provisions of Secti registered agent, or both im familie, win, and acce	ons 607,0502 and 607,1506, Flor in the State of Florida. Such char pt the obligations of, Section 607.	nge was authorized i .0505, Florida Statut	ove-named by the con tes.	poration'	s board of directo	s. I hereby acc	ept the app	pointment as re	gistered
registered logent, or both im familie, Win, and acc	of the State of Florida. Such char of the obligations of, Section 607.	nge was authorized i .0505, Florida Statut	by the con les.	poration	s board of directo	s. I hereby acc	opt the app	pointment as re	gistered
registered agent, or both im families with, and at co- Signatury by or printed name	of registered agent and title if applicable	nge was authorized i 0505, Florida Statut	by the con les.	poration	s board of directo	s. Thereby acc	DATE	:	gistered
egistered rogent, or bottom familie. The and of the Signature typed or printed name	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A	oy the corp les.	poration	s board of directo	s. Thereby acc	DATE	AND DIRECTO	gistered
egistered rotent, or bottom familia. The and access and	of registered agent and title if applicable  FICERS AND DIRECTORS	(NOTE: Registered A DELETE 1.1 TITL	es.  gent signature	poration	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
egistered loosht, or bottom familia fish, and accessing the second of printed name of P LEWIN, HARLEY	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A  NOTE: Registered A  13.  DELETE 1.1 TITL  1.2 NAW	oy the corples.  gent signature	e required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
Signatur hyped or printed name OI P LEWIN, HARLEY 2611 N HIATUS RD	of registered agent and bits if applicable  FICERS AND DIRECTORS	NOTE: Registered A  NOTE: Registered A  13.  DELETE 1.1 TITL 1.2 NAW 1.3 STR	es.  Gent signature  E  KE	e required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
egistered loosht, or bottom familia fish, and accessing the second of printed name of P LEWIN, HARLEY	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A NOTE: Registered A 13. DELETE 1.1 TITL 1.2 NAW 1.3 STR 1.4 CITH	by the corples.  Gent signature  E  ME  EET ADDRESS  (-ST-ZIP	e required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
Signatur hyped or printed name OI P LEWIN, HARLEY 2611 N HIATUS RD	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A  NOTE: Registered A  13.  DELETE 1.1 TITL 1.2 NAW 1.3 STR 1.4 CIT)  DELETE 2.1 TITL	E EET ADDRESS F-ST-ZIP	e required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	E EET ADORES:	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
Signatur hyped or printed name OI P LEWIN, HARLEY 2611 N HIATUS RD	of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	opent signature  E  E  E  E  E  E  E  T  T  T  E  E  E	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char prine obligations of, Section 607.  of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	by the corp less.  E  E  E  E  E  E  E  E  E  E  E  E  E	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char prine obligations of, Section 607.  of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	by the corples.  E  KE  KE  EEET ADDRESS  F  KE  KE  KE  KE  KE  KE  KE  KE  KE	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO	PRS IN 12
egistered coeff, or bottom families with and scenario signature typed or printed name Oi P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char prine obligations of, Section 607.  of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	by the confidence of the confi	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char prine obligations of, Section 607.  of registered agent and title if applicable  FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  LEET ADDRESS	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition
egistered coeff, or bottom families with and scenario signature typed or printed name Oi P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	by the corp less.  E  AE  LEET ADDRESS  F  AE  LEET ADDRESS	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
egistered coeff, or bottom families with and scenario signature typed or printed name Oi P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition
egistered logant, or bottom families with, and scenario signature with the signature of the	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	by the confides.  E  KE  KE  KE  KE  KE  KE  KE  KE  KE	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
egistered coeff, or bottom families with and scenario signature typed or printed name Oi P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  EEET ADDRESS  Y-ST-ZIP  E  ME  EET ADDRESS  Y-ST-ZIP  E  ME  ME  ME  ME  ME  ME  ME  ME  ME	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
egistered logant, or bottom families with, and scenario signature with the signature of the	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  LEET ADDRESS  E  LEET ADDRESS  LEET ADRESS  LEET ADDRESS  LEET ADDRESS  LEET ADDRESS  LEET ADRESS  LEET ADRESS  LEET ADRESS  LEET ADRESS  LEET ADRESS  LEET ADRESS  LET	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change	PRS IN 12 Addition Addition
egistered logat, or bottom familie fish, and some signatury of printed name of P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  LEET ADDRESS  Y-ST-ZIP  E  ME  LEET ADDRESS  Y-ST-ZIP  E  LEET ADDRESS  Y-ST-ZIP  E  LEET ADDRESS  HE  LEET ADDRESS	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  AE  AE  AE  AE  AE  AE  AE  AE	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
egistered logat, or bottom familie fish, and some signatury of printed name of P LEWIN, HARLEY 2611 N HIATUS RD COOPER CITY FL 0	The State of Florida. Such char the obligations of, Section 607 of registered agent and title if applicable FICERS AND DIRECTORS	NOTE: Registered A   13.	E  AE  EEET ADDRESS  Y-ST-ZIP  E  ME  EEET ADDRESS  Y-ST-ZIP  E  ME  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS  Y-ST-ZIP  E  EEET ADDRESS	s required w	s board of directo	s. Thereby acc	DATE	AND DIRECTO Change Change Change	PRS IN 12 Addition Addition Addition
	#, etc. e  Country 25  9. Name and Addres  JAMIN, HAROLD C PEMBROKE RD  MAR FL 33023	FL 33026  FL 33026  FL 33026  Za. Mailing Add 26  #, etc.  City & State 28  Country  Zip 25  9. Name and Address of Current Registered Agent  JAMIN, HAROLD C PEMBROKE RD  MAR FL 33023	S RD. 2611 N. HIATUS RD. #121 COOPER CITY FL 33026  Lace of Business 2a Mailing Address 2a Mailing Address 2b Suite, Apt. #, etc. 27 27 28 City & State 28 Country Zip Country 25 29 30  9. Name and Address of Current Registered Agent  JAMIN, HAROLD C PEMBROKE RD MAR FL 33023	# 25	SRD. 2611 N. HIATUS RD. 121 FL 33026 COOPER CITY FL 33026  FL 33026 Suite, Apt. #, etc. 27  Be City & State 28  Country Zip Country 29 30  9. Name and Address of Current Registered Agent  JAMIN, HAROLD C PEMBROKE RD  MAR FL 33023  261 N. HIATUS RD. 28  Country FL 33026  87 Country 28  Street Address  88 City PEN	Mailing Address SRD.  2611 N. HIATUS RD.  #121 COOPER CITY FL 33026  3. Date Incorpor .05/27/199  4. FEI Number 26 65-049143  #, etc.  Suite, Apt. #, etc.  Country  Zip Country  Zip Country  Zip Country  25 29 30 Personal Pro  9. Name and Address of Current Registered Agent  JAMIN, HAROLD C PEMBROKE RD MAR FL 33023  Mailing Address  4. FEI Number 65-049143  5. Certifcate of 3  6. Election Cam Trust Fund C  28 Country  8. This corporat Personal Pro  10. Name and A  Street Address (P.O. Box Numb  10. Age 10 Country  25 Street Address (P.O. Box Numb  10 Country  26 Street Address (P.O. Box Numb  10 Country  27 Street Address (P.O. Box Numb  10 Country  28 Street Address (P.O. Box Numb  10 Country  29 Street Address (P.O. Box Numb  10 Country  20 Street Address (P.O. Box Numb  10 Country  20 Street Address (P.O. Box Numb  10 Country  10 Country  11 Name  12 Street Address (P.O. Box Numb  13 Country  14 City PEMBROXE	Mailing Address SRD.  2611 N. HIATUS RD. #121 COOPER CITY FL 33026  DO NOT WI  3. Date Incorporated or Qualife .05/27/1994  4. FEI Number 65-0491439  #, etc.  Suite, Apt. #, etc.  City & State  Country  Zip Country  Zip Country  Zip Country  Zip Country  Zip Country  3. Date Incorporated or Qualife .05/27/1994  6. FEI Number 65-0491439  6. Election Campaign Financing Trust Fund Contribution  Country  Zip Country  3. Date Incorporated or Qualife .05/27/1994  6. Election Campaign Financing Trust Fund Contribution  Country  Zip Country  3. This corporation owes the current Registered Agent  10. Name and Address of New  JAMIN, HAROLD C S PEMBROKE RD MAR FL 33023  City Pembroxe  B1 Name  City Pembroxe  Street Address (P.O. Box Number is Not Accept  B3 City Pembroxe  Line  Line  Line Line Line Line Line	Mailing Address S RD.  2611 N. HIATUS RD.  2121 S DO NOT WRITE IN THE  3. Date Incorporated or Qualifed .05/27/1994  4. FEI Number 65-0491439  #, etc. Suite, Apt. #, etc. 27  8 City & State 28 Country 29 30  9. Name and Address of Current Registered Agent  DO NOT WRITE IN THE  3. Date Incorporated or Qualifed .05/27/1994  4. FEI Number 65-0491439  5. Certifcate of Status Desired  Trust Fund Contribution  Country 21p Country 8. This corporation owes the current year Personal Property Tax.  9. Name and Address of Current Registered Agent  DAMIN, HAROLD C  PEMBROKE RD  MAR FL 33023  A City PLOCALE FINES F	SRD. #121 COOPER CITY FL 33026  DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed .05/27/1994  4. FEI Number 65-0491439  #, etc.  Suite, Apt. #, etc.  27  Suite, Apt. #, etc.  City & State Country Zip Country Zip Country Zip Country Sign Sign Sign Sign Sign Sign Sign Sign

pplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information plengental 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 the feceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in a stackment an address, with all other like empowered. I hereby certify that the information sindicated on this annual report or support of the corporation of Block 12 or Block 13 if changed, or or support of the corporation or block 12 or Block 13 if changed, or or support of the corporation or block 12 or Block 13 if changed, or or block 13 if changed, or or block 13 if changed, or or block 14 if changed, or or block 15 if changed, or or block

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #