

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Sep 24 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 # 994000044140
1. Corporation Name
DANIELA-DREYER GROUP, INC.

Principal Place of Business Mailing Address
c/o Sales/Alvin, Inc.
850 Ives DAiry Rd.
Miami, FL 33179

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Country
24	29

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified	6/13/94
4. FEI Number	65-0504620
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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

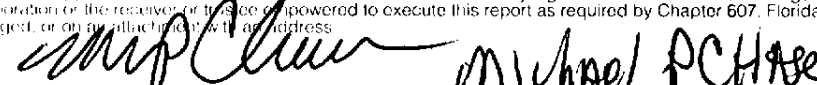
81 Name	Michael Chase, Attorney
82 Street Address (P.O. Box Number is Not Acceptable)	2627 NE 203 St.
83	Suite 205
84 City	N. Miami Beach FL 85 Zip Code 33180

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  (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	Asst. V. Pres.
NAME	Ohletz, Gert W.	12 NAME	Michael Chase
STREET ADDRESS	c/o Sales/Alvin, Inc.	13 STREET ADDRESS	2627 NE 203 St. Suite 205
CITY, ST, ZIP	850 Ives Dairy Rd., Miami, FL 33179	14 CITY-ST-ZIP	N. Miami Beach, FL 33180
TITLE		21 TITLE	
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY, ST, ZIP		24 CITY-ST-ZIP	
TITLE		31 TITLE	
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	
CITY, ST, ZIP		34 CITY-ST-ZIP	
TITLE		41 TITLE	
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY, ST, ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	
NAME		52 NAME	900002650429
STREET ADDRESS		53 STREET ADDRESS	-09/28/98--01100--050
CITY, ST, ZIP		54 CITY-ST-ZIP	***550.00
TITLE		61 TITLE	
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY, ST, ZIP		64 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 contained 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.

SIGNATURE:  Michael PCHase 8/17/98

CR2E034 (5/98)