

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000046738 (8)

1. Corporation Name

DODGE & SONS, INC.



Principal Place of Business
2540 S.W. 28TH ST.
MIAMI FL 33133

Mailing Address
2540 S.W. 28TH ST.
MIAMI FL 33133

3. Date Incorporated or Qualified 06/22/1994	3a. Date of Last Report 08/09/1995
4. FEI Number NOT APPLICABLE	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 has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

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. Country	29. Zip
25. Country	30. Zip

9. Name and Address of Current Registered Agent

EVANS, JAMES C
1700 ALFRED I. DUPONT BLDG.
169 EAST FLAGLER ST.
MIAMI FL 33131

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code

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 type the printed name of the person signing and the title, if applicable.

(NOTE: Registered Agent signature required when reappointing)

Date

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	DODGE, KEVIN
STREET ADDRESS	% 2540 S.W. 28TH ST.
CITY-ST-ZIP	MIAMI FL 33133
TITLE	V
NAME	DODGE, FRANK
STREET ADDRESS	% 2540 S.W. 28TH ST.
CITY-ST-ZIP	MIAMI FL 33133
TITLE	ST
NAME	NORWOOD, JOHN F
STREET ADDRESS	% 2540 S.W. 28TH ST.
CITY-ST-ZIP	MIAMI FL 33133
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	
11. TITLE	☐ Change ☐ Addition
12. NAME	
13. STREET ADDRESS	
14. CITY-ST-ZIP	☐ Change ☐ Addition
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY-ST-ZIP	☐ Change ☐ Addition
31. TITLE	
32. NAME	
33. STREET ADDRESS	
34. CITY-ST-ZIP	☐ Change ☐ Addition
41. TITLE	
42. NAME	
43. STREET ADDRESS	
44. CITY-ST-ZIP	☐ Change ☐ Addition
51. TITLE	
52. NAME	
53. STREET ADDRESS	
54. CITY-ST-ZIP	☐ Change ☐ Addition
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY-ST-ZIP	

800001920398
-08/13/96--01107--026
***225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-24-96 285-4342
05/08/96

CR2E034 (3/96)