

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P94000052107 (7)
1. Corporation Name
DATA DIRECT ENTERPRISES CORP.

Principal Place of Business

272 SW 12TH AVE
DEERFIELD BEACH FL 33442

Mailing Address

272 SW 12TH AVE
DEERFIELD BEACH FL 33442

2. Principal Place of Business

21 160 SW 12th Ave

Suite, Apt. #, etc.

22 Suite 108

City & State

23 Deerfield Beach FL

Zip

Country

24 33442

25

2a. Mailing Address

26 160 SW 12th Ave

Suite, Apt. #, etc.

27 Suite 108

City & State

28 Deerfield Beach FL

Zip

Country

29

30 33442

30

9. Name and Address of Current Registered Agent

O'BRIEN, JENNIFER
272 SW 12TH AVE
DEERFIELD BEACH FL 33442

REINSTATEMENT

6. Date Incorporated or Qualified

07/14/1994

3a. Date of Last Report

02/23/1996

4. FEI Number

65-0515777

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

81 Name

Jennifer O'Brien (Same person)

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

160 SW 12th Ave

83

Ste 108

84 City

Deerfield Beach FL

85

Zip Code

33442

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

Jennifer O'Brien

10/16/97

(NOTE: Registered Agent Signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
O'BRIEN, JENNIFER
STREET ADDRESS
272 SW 12TH AVE
CITY-ST-ZIP
DEERFIELD BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
160 SW 12th Ave Ste 108
Deerfield Beach, FL 33442

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
700002326097-2
-10/21/97--01081--017
****200.00 ****200.00

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
700002326097-2
-10/21/97--01081--018
****550.00 ****550.00

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

JENNIFER O'BRIEN

10-1-97

954429-3542

APPROVED
AND
FILED

97 OCT 17 AM 11:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (4/97)