## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

| DOCUMENT # | P94000057793 | (9) |
|------------|--------------|-----|

DWM BILL DERS. INC.

| Divin D   | OLDENO, IIIO.  |                               |                 |             |  |   |                            |                                  |   |  |
|---|--|-------------------------------|-----------------|-------------|--|---|----------------------------|----------------------------------|---|--|
| Principal Place of Business Mailing Address                           |  |                               |                 |             | - 1 (##li##t ile teint mietr detre men |   |                            |                                  |   |  |
| 12581 S.E. 54TH AVENUE 12581 S.E. 54TH AVENUE BELLEVIEW FL 34420-5158 |  |                               |                 |             |  |   |                            |                                  |   |  |
|   |  |                               |                 |             |  | 3. Date Incorporated or Qualified 08/01/1994  |                            | e of Last Re<br><b>)5/11/199</b> |   |  |
| 2. Filliofpart Bloc of Boomedo  |  | 2a. Mailing Address           | lailing Address |             |  | 4. FET Number 59-3260849  |                            |                                  | Applied For<br>Not Applicable             |  |
| Suite, Apt #, etc. Suite, Apt #, etc.                                 |  |                               |                 |             |  | 5. Certificate of Status Desired  |                            | <b>+</b>                         | Additional<br>lequired                    |  |
| City & State  |  | Orty & State                  | Orty & State    |             |  | Election Campaign Financing     Trust Fund Contribution                             | S5.00 May Be Added to Fees |                                  |   |  |
| Zip   | Country  | Zιρ                           | Cou             | intry       |  | 8. This corporation has liability for   |                            | tax under s                      | 199.032,                                  |  |
| 24  | 25   |                               |                 |             | Florida Statutes Yes No                |   |                            |                                  |   |  |
|   | 9. Name and Address of Curren  | t Registered Agent            |                 | 81          |  | 10. Name and Address of New   | Registered                 | Agent                            |   |  |
| BELLEVI<br>11. Pursuani t   | .E. 54TH AVENUE<br>EW FL 34420-5158<br>of the provisions of Sections 607.0502<br>ad agent, or both, in the State of Flori<br>h, and accept the obligations of Sections | aa istich charac was autron   | ZOCI LIY UTO    | 84<br>ove f |  | ration submits this statement for the p<br>and of directors. I hereby accept the ap | Flurpose of copointment a  | handing its r                    | o Code<br>egistered office<br>agent I anı |  |
| SIGNATURE _   | Signature Nyest corporest na tolicité de la tagisti  | t and title it associates 414 | rii Bootoo      | ТАдн        | t supration to pro-                    | રત શ્રમિલ - ઉત્તર પ્રતિ (સું  | DATE                       |                                  |   |  |
| 12.   |  | D DIRECTORS                   | 13.             |             |  | ADDITIONS CHANGES TO OF   | FICERS AN                  |                                  |   |  |
| TITLE   | D  | ☐ DELFTŁ                      | 1.1             | 111.5       |  |   |                            | Change                           | ☐ Addit on                                |  |
| NAME  | MATHIS, DENNIS W   |                               | 121             | iAM(        |  |   |                            |                                  |   |  |
| STREET ADDRESS  | 12581 S.E. 54TH AVENUE   |                               | 135             | TREET       | I ADDRESS                              |   |                            |                                  |   |  |
| CiTY-ST-74P   | BELLEVIEW FL 34420-5158  |                               |                 |             | 5' 7P                                  |   |                            | [] Change                        | Addition                                  |  |
| TITLE   |  | ☐ DELETE                      | 2 1             | Tille       |  |   |                            | Change                           | □ Addition                                |  |
| NAME  |  |                               |                 | IAME        |  |   |                            |                                  | \   |  |
| STREET ADDRESS  |  |                               |                 |             | LADDRESS                               |   |                            |                                  |   |  |
| CITY - ST - ZIP   |  | F7 55. 5 51                   |                 |             | ST ZIP                                 |   |                            | Change                           | Addition                                  |  |
| THLE  |  | ☐ DELETE                      |                 | TITLE       | İ                                      |   |                            |                                  |   |  |
| NAME  |  |                               |                 | NAME        |  |   |                            |                                  |   |  |
| STREET ADDRESS  |  |                               |                 |             | ET ADDRESS                             |   |                            |                                  |   |  |
| CITY-ST-ZIP   |  | E) profit                     |                 |             | S1-ZIP                                 |   |                            | Change                           | Addition                                  |  |
| TITLE   |  | DELETE                        | 4 1             | TI'LE       |  |   |                            | ٥ ست                             |   |  |

14. Lob 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 earth; 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 13 inchanged, or on an attachment with an address.

4.2 NAME

5 1 T-TLF

5.2 NAME

6.1 DHE

62 NAME

4.3 STREET ADORESS

53 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - 2IP

4.4 CITY - ST - ZiP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

COTY-ST-ZIP

CITY ST-ZIP

DELETE

DELFTE

☐ Change

☐ Change

Addition

Addition