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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sanora B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400061897 (2)

1. Corporation	Name	` '				
DAVE M	IAR SPECIALTIES, INC.			 1 Deriverio Mir (dia) Deriv Brevo Bero	A BOYAL BOLLE BLIDL HIGHE HOLLD JOHN HOOL HOLL	
Principal Place (of Business	Mailing Addirest				
1971 W LUMSDEN ROAD SUITE 146		1971 W LUMSDEN ROAD SUITE 146				
BRANDON FL 33511 US		BRANDON FL 33511 US		3. Date Incorporated or Qualified	3a. Date of Last Report	
US		US		08/18/1994	08/24/1995	
2. Principal Pla	ce of Business	2a. Mailing Address	,	4. FEI Number	Applied For	
21		26		59-3272537	Not Applicable	
Suite, Apt. #	e, etc	Suite, Apt # etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zip	Country	Zφ	Country	8. This corporation has liability for		
24	25		30		s 🔀 No	
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New	Registered Agent	
			81 Name			
FRANCIS, DAVID 1031 AXELWOOD CIRCLE			82 Street Ad	1018 Axievood Circle		
			1018			
Brandoi	N FL 33511		83			
			84 City		85 Zip Code	
			اکا ا	randon	FL 👸 33511	
11. Pursuant to	o the provisions of Sections 607,050	12 and 607.1508, Florida Statutes	, the above named corp	oration submits this statement for the p	urpose of changing its registered office	
or registere familiar witi	n, and accept the obligations of, Sec	ndar Sacri change was authorized bion 607.0505, Horida Statutes.	by the corporation's be	pard of directors. Thereby accept the ap	pointment as registered agent, train	
SIGNATURE _						
SIGNATURE _	Signature: typeri or printed name, of mig 25 in 1 ages	tariffe dacreace de de	Bog to sa Agent signal or req		DATE	
12.	OFFICERS AN	ND DIRECTORS	13.		FICERS AND DIRECTORS IN 12	
THILE	D	[]] DELETE	1 1 TITLE	D Tarana Danada	🛣 Change 🔲 Addition	
NAME	FRANCIS, DAVID		1.2 NAME	Francis, Javier	,	
STREET ADDRESS	1031 AXELWOOD CIRCLE		1.3 STREET ADDRESS	Francis, David 018 Axlewood Circ	ie i	
C-TY-ST-ZIP	BRANDON FL 33511		1.4 C(1) - S1 - Z(F	Brandon, FL 33	5/1	
TITLE		☐ DELETE	2 1 TITLE	•	Change 🔲 Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS		•	
CITY-ST-ZIP			2.4 CITY - \$1 - ZIP			
TITLE		☐ DEFEIF	3 1 THE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY - ST - ZIP			3.4 CITY - S1 - 7IP			
TITLE		DELETE	4 ' TITLE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4.Ci1y - ST_ZiP			
TITLE		DELET!	5 1 THLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP			5.4.CITY - ST - ZIP			
TITLE		DELETE	6 1 TITLE		Change Addition	
NAME			6 2 NAME		· · · · · ·	
STREET ADDRESS			6 3 STREET ADURESS			
CITY-S1-ZIP			6.4 CiTy - ST- ZiP			
	L certify that the information supplied	I with this fitne is valuatable famis	. , . , 🚾	y for the exemption stated in Section 11	9.07(3)(k) Flooda Statutes I further	

r do nereby certify that the information supplied with this filing is voluntarily furnished and does not quitify for the exemption stated in Section 119 07(3)(k). Floods 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, Floods Statutes; and that my name appears in Block 12 or Block 13 if trianged or or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FRANCIS 5.14.96 (813)654-4218