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

PROFIT CORPORATION, ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000067538 (6)

DARTMOUTH GROUP INTERNATIONAL, INC.

Principal Place	of Business Mailing A	Address		1 CA B150 B1 310 (0(1) 010)(0 01/(0	8111 84 111 88 11 8 61	, 188 5 1 0f 18	A 41101 1011 1001
A40 AIAUT	ST.	648 NAUTICAL WAY ST. AUGUSTINE FL 32084 US					
US	US			3. Date Incorporated or Qualified 09/14/1994	3a. Date of Last Report 04/11/1995		
2. Principal Place of Business 2a. Mailing Add		g Address		4. Fet Number 59-3267409	Applied For Not Applicable		·
Suite, Apt.	t etc.	. Apt. #, etc.		39-3207409		\$8.75 A	
22 27		Some, rept. #, etc.		5. Certificate of Status Desired		Fee Re	
City & State 28		City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Country Zip: 24 25 29		Go 30	untry	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
<u></u>	9. Name and Address of Current Registered			10. Name and Address of New F	Registered Ag	ent	
			81 Name				,
The Law Firm of Lawrence J. Spiegel Chrtrd 343 Almeria Avenue			82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
CORAL GABLES FL 33134			83				
J J J J			94 Cit :		ı	ar 7:- 2	Codo
			84 City		FL	85 Zip 0	Jode
SIGNATURE _	Signature, speed or perilist, some of registered signs can activate in approach		of Agent signature respi	earwhermenstring: ADDITIONS/CHANGES TO OFF	DÁTĒ ICERS AND D	IRECTOR:	S IN 12
TITLE	P	LAME TO SERVICE STREET	TIPLE			Change	Addition
NAME	FRANQUI, KENNETH		NAME				
STREET ADDRESS	848 NAUTICAL WAY IS PENN PL	42A,0F2	STREET ADDRESS				
CITY - ST - ZIP	ST. AUGUSTINE FL NY NY 1000		CITY ST ZIP				
TITLE	P	☐ DELETE 2.1	DILE.			Change	☐ Addition
NAME	JERALO C. CORRIEN	221	NAME .				
STREET ADDRESS	648 NAUTICAL WAY	,	STEELT ADDRESS				
CrTY-ST-ZIP	ST. AUGUSTINE PL. 32		CITY-SI-ZIP			Change	Addition
TITLE		- '	DILE :		L	Charge	
NAME STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
TITLE			TILE			Change	Addition
NAME		42	NAME				
STREET ADDRESS		43	STREET ADORESS				
CITY-ST-ZIP		4.4	CHY-S1-ZIF				
THLE		DELETE 5 1	TITLE			Change	Addition
NAME		5 2	NAME				
STREET ADDRESS		5 3	STREET ADDRESS				
CITY-ST-ZIP			CITY - ST - ZIP				
TITLE		_	Title [7000017 -04/09/9601	7440	Change	☐ Addition
NAME			NAME	-04/09/9601	12502	' x	XSD.
STREET ADDRESS			STREET ADDRESS	***200.00		a	9.0
CITY - ST - ZIP		6.4	CITY-ST-Z:P				ц- 1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and closs 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 trusted 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 fin an attachment with an address

SIGNATURE: NG OFFICER OF DIRECTOR 212-2682868 Daytine Phone #