

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 31 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P94000092045 (1)

1. Corporation Name

DALLAS FINANCIAL CORP., INC.

Principal Place of Business

712 U.S. HWY. ONE
NORTH PALM BEACH FL 33408

Mailing Address

712 U.S. HWY. ONE
NORTH PALM BEACH FL 33408

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 439 N.E. 7TH AVE

Suite, Apt. #, etc.

22

City & State

23 FT. LAUDERDALE, FL

Zip

24 33301

Country

25 USA

2a. Mailing Address

26 439 N.E. 7TH AVE.

Suite, Apt. #, etc.

27

City & State

28 FT. LAUDERDALE, FL

Zip

29 33301

Country

30 USA

3. Date Incorporated or Qualified

12/21/1994

4. FEI Number

65-0576303

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 owes or has paid the current year's
Personal Property Tax due June 30.

☐

Yes

☒

No

9. Name and Address of Current Registered Agent

DAMBRA, GEORGIANA
5737 OKEECHOBEE BLVD., STE. 201
WEST PALM BEACH FL 33417

10. Name and Address of New Registered Agent

81 Name

GLENN E. GROMANN, ESQ.

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

439 N.E. 7TH AVENUE

83

84 City

FT LAUDERDALE

FL

85 Zip Code

33301

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 of record 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]

GLENN E. GROMANN, ESQ.

3/10/98

Signature type: 1. Registered name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
1. LAMPARELLO, MARK
51 COEYMAN AVENUE
NUTLEY NJ

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
2. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
3. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
4. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
5. ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
6. ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP
☐ Change ☐ Addition

14. I 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]

3-12-98

954-764-5007

CR2E034 (10/97)