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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000012834 (4)

DAC INTERNATIONAL INC.

FILED Feb 23 1998 8:00am Secretary of State



Date desail Disc								
Principal Place of Business Mailing Address							,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	
1705 CEDAR GLEN DR. 1705 CEDAR GLEN DR. APOPKA FL 32712 APOPKA FL 32712			R.					
		AFORM IL SETTE				DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
	No. of D	- F-1 - V				02/13/1995		
⊢ ¬	Place of Business	2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt.	# etc	Suite, Apt. #, etc.				59-3297257		Not Applicable
22 27						5. Certificate of Status Desired		5 Additional Regulred
City & State City & State				··· · · · · · · · · · · · · · · · · ·		6. Election Campaign Financing		00 May Be
23		[28]				Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the cu	irrent year	Intangible
24	[25]	29	30				Yes	□ No
	g, Name and Address of Curi	rent Registered Agent		81	N1	10. Name and Address of New Registered	Agent	
	DERSON, DANNY L			ا'°	Name			
1705 CEDAR GLEN DR. APOPKA FL 32712				82	Street Addre	Address (P.O. Box Number is Not Acceptable)		
AP	UPRA PL 32/12		}	83				
				84	City	FI	85 Zi	ip Code
SIGNATURE	Signaturo Typesi or printest name of registered			l Agen	nt signature require	od when reinstating) DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	D ANDEDOOM DAMEN	☐ DELETE	11 TIT				Chang	e Addition
NAME DEDICE ADDRESS	ANDERSON, DANNY L 1705 CEDAR GLEN DR.		1.2 NA					
STREET ADDRESS CITY-ST-ZIP	APOPKA FL 32712		1		ADDRESS			
TITLE	A OTTATE SETTE	DELETE	1.4 CIT 2 1 TIT		- ZIP		Chang	e Addition
NAME			2.2 NA					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			2. 4 Cf		i i			
TITLE		☐ DELETE	3.1 TfT	LE			Chang	e Addition
NAME			3.2 NA	ME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP		T Driver	3.4. CI		I-ZIP			
TITLE		☐ DELETE	4.1 TIT				☐ Chang	e [] Addition
NAME Street address			4. 2 NA		LDDBECC			
CITY-ST-ZIP			4.3 STF		ADDRESS			
TITLE		DECETE	5.1 TiTi		- 211		☐ Change	e Addition
NAME			5 2 NAI					
STREET ADDRESS			5 3 STF	REETA	address			
CITY-ST-ZIP			5.4 CIT		ľ			
TITLE		DELETE	6.1 TITE				Change	e Addition
NAME			6.2 NA	ME				
STREET ADDRESS			6.3 STR	REET A	WDRESS			
CITY-ST-ZIP			6.4 CIT	Y - ST -	- ZIP			

14. Thereby 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 of 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 carporation or the repover 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 applicational with an address

1-17-98