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

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortnami Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000021138 (9)						
DISTINCTIVE IMAGES OF SOUTH FLORIDA, INC.							
Principal Place of Business	Mailing Address	···					



8425 W. CO TAMARAC F	MMMERCIAL BLVD. EL 33351	8425 W. COMMERCIA TAMARAC FL 33351	il BLVD.			
				3. Date Incorporated or Qualified 03/08/1995	3a. Date of Last Report	
21	lace of Business	2a. Mailing Address 26		4. FEI Number 65-0594212	Applied For Not Applicable	
Suite, Apt. #, etc. 22 City & State		Suite. Apl. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Zip Zip		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
24	Country 25 9. Name and Address of Curr	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	□No	
· · · · · · · · · · · · · · · · · · ·	3. Marie Bilo Address of Coli	ent negistered Agent	81 Name	10. Name and Address of New Re	egistered Agent	
DUDICS	, Frank e sr.		7.4.7.0			
8425 W	8425 W. COMMERCIAL BLVD.			dress (P.O. Box Number is Not Acceptable	e)	
TAMARA	NC FL 33351		83			
			84 City		85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.0508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of, Section 607.0505. Florida Statutes						
SIGNATURE	Signal are typical or product man a of registeries as	of the second se	ilî E. Bugisterdu Ağı ol sığı allarısı requa	7	120/26	
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS CHANGES TO OFFICE	ERS AND DIRECTORS IN 16	
TITLE	D	☐ DELETE	1 1 TITEF		☐ Change ☐ Addition	
NAME	DUDICS, FRANK E SR.	_	1.2 NAME		<u> </u>	
STREET ADDRESS	8425 W. COMMERCIAL BLY	D.	1.3 STREET ADDRESS		i	
CITY - ST - ZIP	TAMARAC FL 33351		1.4 Cilly - S1 - ZiP			
TITLE	T	DELETE	2 1 1111.8		☐ Change ☐ Addition	
NAME STREET ADORERS	POLLMANN, JENNIE 8425 W. COMMERCIAL BLV	n	2.2 NAME			
STREET ADDRESS	TAMARAC FL 33351	U.	2.3 STREET ADDRESS			
CITY-ST-ZIP TITLE	IMMANO FE 33331	Fig. rst (16	2 4 CITY - ST ZIP			
NAME		☐ DEL€ I€	3 1 TITLE		Change Addition	
STREET ADDRESS			3 2 NAME		ļ	
CITY - ST - ZIP			3.3 STREET ADDRESS			
TITLE			4 1 TITLE			
NAME		C) Petere	4.2 NAME		Change Addition	
STREET ADDRESS			4 3 STREET ADDRESS		1	
CITY-ST-ZIP			4 4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TITLE			
NAME		Lan. J	5.2 NAME		Change Addition	
STREET ADDRESS			5.3 STHEET ADDRESS			
CITY-ST-ZIP			54 City-St-Zip			
TITLE		☐ DELETE	6 I TITLE		Change C Adda	
NAME		_	6 2 NAME		Change Addition	
STREET ADDRESS			6 3 STREET ADDRESS			
CHTY-ST-ZIP			64 CHTY-SI-ZIP			
14. Ldo hereby	Certify that the information cumplied	with the files is all as it is	04 CH 2-31-716			

I do 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 rny signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: FLAME DENS. SELD 3/20/96 CASTONE PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DENS. SELD 3/20/96