

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000026562

1. Entity Name

DAL INTERNATIONAL, INC.

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90364 029 ***150.00

Principal Place of Business

310 SE MIZNER BLVD.
1003
BOCA RATON FL 33432

Mailing Address

102 NE 2 ST.
305
BOCA RATON FL 33432

00004722



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

220 SE MIZNER BLVD
Suite, Apt. #, etc.
205

3. Mailing Address

220 SE MIZNER BLVD
Suite, Apt. #, etc.
205

City & State

BOCA RATON

City & State

BOCA RATON

4. FEI Number

65-0606350

Applied For

Not Applicable

Zip

Country

33432

USA

Zip

Country

33432

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DANIELS, RICHARD G
3241 N.E. 59TH STREET
FT. LAUDERDALE FL 33308

Name
D'AMICO, DALBERTO O.

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

220 SE MIZNER BLVD, #205

City

BOCA RATON

FL

Zip Code

33432

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

DATE

2/13/01

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PSTD
D'AMICO, DALBERTO O
310 SE MIZNER BLVD., 305
BOCA RATON FL 33432

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
220 SE MIZNER BLVD #205
BOCA RATON, FL 33432

☒ Change ☐ Addition

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/13/01 (561) 416-4002

CR2E034 (10/00)