

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

0119069

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

FILED

98 AUG 18 AM 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # **P95000030011 (7)**

1. Corporation Name

D & L CONSULTING, LTD. INC.

Principal Place of Business

**1001 SW 2ND AVENUE
SUITE 3115
BOCA RATON FL 33432
US**

Mailing Address

**1001 SW 2ND AVENUE
SUITE 3115
BOCA RATON FL 33432
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1995

4. FEI Number

65-0578654

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 Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 160 W Camino Real

Suite, Apt. #, etc.

22 Suite 115

City & State

23 Boca Raton FL

Zip

24 33432

Country

25 US

2a. Mailing Address

26 160 W Camino Real

Suite, Apt. #, etc.

27 Suite 115

City & State

28 Boca Raton FL

Zip

29 33432

Country

30 US

9. Name and Address of Current Registered Agent

**MULTI MEDIA PARALEGAL
1733 SW 5 COURT
FT LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PT	<input type="checkbox"/> DELETE
NAME	HEILMAN, DAVID L.	
STREET ADDRESS	129 LEHANE TERR	
CITY-ST-ZIP	NORTH PALM BEACH FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	COSENZI, DIANE	
STREET ADDRESS	1985 SW 10TH ST	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	400002625664
1.3 STREET ADDRESS	-08/26/98--01077--001
1.4 CITY-ST-ZIP	***150.00 ***150.00
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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:

DAVID L. HEILMAN

8/6/98 (56) 867-1275

CR2E034 (5/98)

D & L CONSULTING, LTD. INC.
160 W. CAMINO REAL #115
BOCA RATON, FL 33432

August 8, 1998

Division of Corporations
Florida Department of State
P.O. Box 6327
Tallahassee, Florida 32314

Subject: D & L Consulting, Ltd. Inc.
Ref. Number : P95000030011

Thank you for your letter of July 23, 1998, apparently there was some confusion regarding the address of D & L Consulting, Ltd. Inc. (Exhibit-A) This letter is addressed to the correct address as we had notified you some time ago regarding a change in address. At this time we are sending you a check for \$150.00 to keep D & L Consulting, Ltd. Inc. in good standing with the State of Florida. Thank you for your cooperation.

Thank you,

A handwritten signature in black ink, appearing to read 'DSC' followed by a stylized flourish.

Diane Cosenzi
Secretary