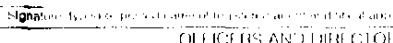
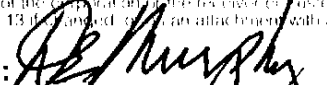


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Jul 09 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 # P95000056177 (5) 1. Corporation Name: DANEN INVESTMENTS INC			
Principal Place of Business: 25316 TRADEWINDS DRIVE LAND O' LAKES, FL 34639		Mailing Address: 25316 TRADEWINDS DR LAND O' LAKES, FL 34639	
2. Principal Place of Business: 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address: 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 07-18-1995 4. FEI Number 59-3326441 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 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	
9. Name and Address of Current Registered Agent MURPHY, D. E. 25316 TRADEWINDS DRIVE LAND O' LAKES, FL 34639-5505		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL	
11. Pursuant to the provisions of Sections 607.0502 and 607.1608, 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:  (Print Name of Agent or Officer or Director) (Date)			
12. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 NAME 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP 21 NAME 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 31 NAME 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP 41 NAME 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP 51 NAME 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP 61 NAME 62 NAME 63 STREET ADDRESS 64 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)(c), 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 I am listed as an attachment with an address.			
SIGNATURE:  DAVID E. MURPHY		7-1-98 813-913-3576	

CR2E034 (10/97)