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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000061679

DIXSAN, INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90064 031 ***150.00



Principal Place of Business		Mailing Address			į			
440 US HIGHWAY 1 VERO BEACH FL 32962		440 US HIGHWAY 1 VERO BEACH FL 32962						
					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed	THOUTHOL		1
					08/09/1995			ł
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Apr	olied For		
		26		65-0610044	— — · · ·	Applicable	} 3	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 A	dditional	1
22		27		5. Certifcate of Status Desired	Fee Re	quired		
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be		
23		28		Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Country		 This corporation owes the current year. 			
24	25	29	30		Personal Property Tax.	☐ Yes ☐ No		
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Regis	tered Agent		┨
OFF	FENDALL DEV		8	1 Name				
	FENDALL, REX		82 Street Add		ddress (P.O. Box Number is Not Acceptable)			1
	US HIGHWAY 1				98 C C C C C C C C C C C C C C C C C C C		16, 1951 .Cat	-
VER	O BEACH FL 32962		8	3			4. 13	
			8	4 City	Frankling Strategy Strategy	85 Zip C	ode	1
						FL		_
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statute	es, the abo	ve-named co	rporation submits this statement for the purporation's board of directors. I hereby accept the	ose of changing its appointment as rec	registered aistered	
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statute	s.	morro board or anostorer viscos, and a		_	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE	Registered Ag	ent signature requ	pired when reinstating) D	ATE		6
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12	عَ ا
TITLE	PTD	☐ DELETE	1.1 TITLE		5, 6, 134.3	☐ Change	. Addition	1
NAME	DEFFENDALL, REX		1.2 NAME		,	** * 1		1 6
STREET ADDRESS	440 US HIGHWAY 1		1.3 STRE	ET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL 32962		1.4 CITY-	ST-ZIP				၂ ၌
TITLE	VSD	☐ DELETE	2.1 TITLE			☐ Change	Addition	۱ ۲
NAME	BROWN, MALCOLM		2.2 NAME	<u> </u>				
STREET ADDRESS	440 US HIGHWAY 1		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	VERO BEACH FL 32962		2. 4 CITY	-ST-ZIP				╛
TITLE		☐ DELETE	3.1 TITLE			☐ Change	Addition	Ì
NAME			3.2 NAMI	■				
STREET ADDRESS			3.3 STRE	ET ADDRESS		· · · · · · · · · · · · · · · · · · ·	(* × ½ , *.	
CITY-ST-ZIP			3.4. CITY				5 (1 to)	
TITLE		☐ DELETE	4.1 TITLE		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change	Addition	1
NAME	·		4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADORESS			•	
CITY-ST-ZIP			4.4 CITY-ST-ZIP					╛
TITLE		☐ DELETE	5.1 TITLE			☐ Change	☐ Addition	1
NAME			5.2 NAME					
STREET ADDRESS			5.3 STRE	ET ADDRESS				
			5.4 CITY	-ST-ZIP	•		• <u> </u>	J `
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition	1
NAME			6.2 NAM	Ε				
			6.3 STR	ET ADDRESS				
STREET ADDRESS			6.4 CITY-ST-ZIP					
CITY-ST-ZIP							f 41	_

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, with all other like empowered.

SIGNATURE: