

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P95000066846 (3)**

1. Corporation Name
DOMINICUS PURCHASING AGENT, INC.



Principal Place of Business: **7066 CATALINA JULE DRIVE LAKE WORTH FL 33467**
Mailing Address: **7066 CATALINA JULE DRIVE LAKE WORTH FL 33467**

3. Date Incorporated or Qualified: **08/29/1995**
3a. Date of Last Report

2. Principal Place of Business
21 **7066 CATALINA ISLE DR**
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

2a. Mailing Address
26 **7066 CATALINA ISLE DR**
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

FEI Number: **65-0614915**
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**
B. This corporation has liability for intangible tax under s 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

**FILINGS, INC.
3732 N.W. 16TH STREET
FORT LAUDERDALE FL 33311**

10. Name and Address of New Registered Agent

81 Name: **NORBERT BECKER**
82 Street Address (P.O. Box Number is Not Acceptable): **7066 CATALINA ISLE DR**
83
84 City: **LAKE WORTH** FL 85 Zip Code: **33467**

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]*
Date: **1-31-96**

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

D DELETE
TITLE: **BECKER, NORBERT W**
NAME: **7066 CATALINA JULE DRIVE LAKE WORTH FL 33467**
STREET ADDRESS:
CITY - ST - ZIP:
D DELETE
TITLE: **FRANCO, ELEANA**
NAME: **7066 CATALINA JULE DRIVE LAKE WORTH FL 33467**
STREET ADDRESS:
CITY - ST - ZIP:
 DELETE
TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
 DELETE
TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:
 DELETE
TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

1.1 TITLE: Change Addition
1.2 NAME:
1.3 STREET ADDRESS: **7066 CATALINA ISLE DR**
1.4 CITY - ST - ZIP:
2.1 TITLE: Change Addition
2.2 NAME:
2.3 STREET ADDRESS: **7066 CATALINA ISLE DR.**
2.4 CITY - ST - ZIP:
3.1 TITLE: Change Addition
3.2 NAME:
3.3 STREET ADDRESS:
3.4 CITY - ST - ZIP:
4.1 TITLE: Change Addition
4.2 NAME:
4.3 STREET ADDRESS:
4.4 CITY - ST - ZIP:
5.1 TITLE: Change Addition
5.2 NAME:
5.3 STREET ADDRESS:
5.4 CITY - ST - ZIP:
6.1 TITLE: Change Addition
6.2 NAME:
6.3 STREET ADDRESS:
6.4 CITY - ST - ZIP:

14. 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 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: *[Signature]* Date: **1-31-96** Daytime Phone #: **(407) 433-2162**

CR2E034 (12/95)