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

**PROFIT CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State '\* DIVISION OF CORPORATIONS

## DOCUMENT # P95000079255 (2)

DAVID DENGLER, INC.

| Principal | Place of | Business |
|-----------|----------|----------|
|-----------|----------|----------|

C/O JOHN H. HULL

Mailing Address

C/O JOHN H. HULL

## **FILED** Jun 06 1997 8:00am Secretary of State



| 1925 NE 45 8T., 8TE, 235<br>FT, LAUDERDALE FL 33308 |                           | 1925 NE 45 ST., STE, 235<br>FT, LAUDERDALE FL 33308-5130                |  |                 |              |               |                                       |   |                |                                       |             |                  |
|---|---------------------------|---|--|-----------------|--------------|---------------|---------------------------------------|---|----------------|---------------------------------------|-------------|------------------|
| र रा क्यांकिकिशक्तात्रमक र क कम्प्रकृत              |                           |   |  |                 |              |               |                                       | 3. Date Incorporated or Qualified 10/12/1995                                  | 05/            | 3a. Date of Last Report<br>05/01/1996 |             |                  |
| 2. Principal Pla                                    | ace of Busine             | ss  | 2a. Mail                               | ing Address     |              |               |                                       | 4. FEI Number 1.5 A14   | 70442          |                                       | Appl        | ed For           |
| 21  |                           |   | 26                                     |                 |              |               |                                       | APPLIED FOR   |                |                                       | Not A       | Applicable       |
| Suite, Apt. #                                       | , etc.                    |   | Suite                                  | e, Apt. #, etc. |              |               |                                       | 5. Certificate of Status Desired  |                |                                       |             | ditional         |
| 22  |                           |   | 27                                     |                 |              |               |                                       | 5. Certificate of States Sesiled  |                | Fee                                   | Requ        | ired             |
| City & State  |                           |   | City                                   | & State         |              |               |                                       | 6. Election Campaign Financing  | _              | \$5.0                                 | <b>00</b> м | ay Be            |
| 23  |                           |   | 28                                     |                 |              |               | · · · · · · · · · · · · · · · · · · · | Trust Fund Contribution   |                | Add                                   | ed to       | Fees             |
| Zip   |                           | Country   | Zıp                                    |                 | Cour         | ntry          |                                       | 8. This corporation has liability f   |                |                                       | ers. 1      | 99.032,          |
| 24  | 2                         |   | 29                                     |                 | 30           |               |                                       | Florida Statules  |                | No.                                   |             |                  |
|   | 9. Name a                 | nd Address of Curre   | nt Registered                          | Agent           |              |               |                                       | 10. Name and Address of New   | Registered     | Agent                                 |             |                  |
|   | gler, davi<br>I SW 32 Avi |   |  |                 |              | 81            | Name                                  | de (DO De New York Alexander)   |                |                                       |             |                  |
|   | LYWOOD FI                 |   |  |                 | 1'           | 82            | Street Add                            | dress (P.O. Box Number is Not Accep   | iabiej         |                                       |             |                  |
| . חטנ   | TIMOOD R                  | L 33023   |  |                 | h            | 83            |                                       |   |                |                                       |             |                  |
| •   |                           |   |  |                 | }            | -             |                                       |   |                |                                       |             |                  |
| •   |                           |   |  |                 |              | <b>B</b> 4    | City                                  |   | FL             | 85                                    | Zip Co      | de               |
|   |                           |   |  |                 |              | i             | <del></del>                           | prporation submits this statement for th                                      |                | •                                     |             |                  |
| SIGNATURE   |                           |   |  |                 |              |               |                                       | ation's board of directors. I hereby ac                                       | DATE           |                                       |             |                  |
|   | Signature, typed or       | printed name of registered a  | Sent and title if appli<br>ND DIRECTOR |                 | 13.          | Age           | nt signature req                      | quired when reinstating) ADDITIONS/CHANGES TO OF                              |                | DIRECT                                | TORS.       | IN 12            |
| 12.   | D                         | OFFICENS AI   | ID DIRECTOR                            | DELETE          | 1.1 301      | 16            | T                                     | ADDITIONS/CHANGES TO CI   | TOLITO ATT     | Chan                                  |             | Addilio          |
| TITLE   | DENGLER                   | DAVAD A   |  | Ditte           |              |               |                                       |   |                |                                       | ,90         |                  |
| NAME  | 3501 SW                   |   |  |                 | 1.2 NAI      |               | 45.005.00                             |   |                |                                       |             |                  |
| STREET ADORESS                                      |                           |   |  |                 | 1            |               | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   | HULLTWU                   | OD FL 33023   |  | Delete          | 1.4 CIT      | _             | 1 - ZIP                               |   |                | ☐ Char                                |             | Additio          |
| TITLE   |                           |   |  | ☐ DELETE        | 2 1 TIT      |               |                                       |   |                | LJ Gliai                              | ıge         | L AUGILIO        |
| NAME  |                           |   |  |                 | 2.2 NA       |               |                                       |   |                |                                       |             |                  |
| STREET ADDRESS                                      |                           |   |  |                 |              |               | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   |                           |   |  | T berese        | 2.401        | _             | ST - ZIP                              |   |                | ☐ Char                                |             | Addition         |
| TITLE   |                           |   |  | ☐ DEFELE        | 3 1 7(7)     |               |                                       |   |                | Cria:                                 | iye         | LT Audition      |
| NAME  |                           |   |  |                 | 3.2 NA       |               |                                       |   |                |                                       |             |                  |
| STREET ADDRESS                                      |                           |   |  |                 | 3.3 STI      | REET          | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   |                           |   |  | T en ese        | 3.4 CI       |               | ST - ZIP                              |   |                | 110                                   |             | 1 3 3 C -        |
| TITLE   |                           |   |  | ☐ DELETE        | 4.1 TIT      |               |                                       |   |                | L Char                                | iğe         | Addition         |
| NAME  |                           |   |  |                 | 4. 2 NA      |               |                                       |   |                |                                       |             |                  |
| STREET ADDRESS                                      |                           |   |  |                 |              |               | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   |                           |   |  |                 | 4.4 011      |               | 1- ZIP                                |   |                | F16:                                  |             | l aggres         |
| TITLE   |                           |   |  | L DELETE        | 5.1 TiT      |               |                                       |   |                | [] Char                               | ige         | Addition         |
| NAME  |                           |   |  |                 | 5.2 NA       |               |                                       |   |                |                                       |             |                  |
| STREET ADDRESS                                      |                           |   |  |                 | 5.3 STI      | REET          | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   |                           |   |  |                 | 5.4 CIT      | _             | .T - ZIP                              |   |                |                                       |             | T a see          |
| TATLE   |                           |   |  | DELETE          | 6.1 111      | LF            |                                       |   |                | Char                                  | nge         | Addition         |
| NAME  |                           |   |  |                 | 6.2 NA       | ME            |                                       |   |                |                                       |             |                  |
| STREET ADDRESS                                      |                           |   |  |                 | 6.3 ST       | REET          | ADDRESS                               |   |                |                                       |             |                  |
| CITY-ST-ZIP   |                           |   |  |                 | 6.4 CIT      | <u>[Y-</u> \$ | sT - ZiP                              |   |                |                                       |             |                  |
| 14. I do hereb                                      | y certify that            | the information suppli  | ed with this fili                      | ng does not qua | dify for the | exe           | mption stat                           | ted in Section 119.07(3)(i), Florida Stat                                     | utes. I furthe | er certify                            | that th     | e<br>or oath, th |
| 1   | 16:                       | n this annual report of<br>lor of the corporation<br>Block 13 if change | ar tha raaaiyar                        | ar kustoa amaa  | warad ta a   |               | suda libia raa                        | nat my signature shall have the same loort as required by Chapter 607, Floric | a Statutes;    | and that i                            | my na       | me               |