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PROFIT
CORPORATION
ANNUAL REPORT
1998
DOCUMENT #
1. Corporation Name
DENIS INVESTMENT

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

P95000082007 (2)

Block 12 or Block 13 if changed, or on an attachment with an address

FILED Feb 11 1998 8:00am Secretary of State

DENIS INVESTMENT GROUP, INC. Principal Place of Business Mailing Address 416-LAGUNA AVE. 410 LAGUNA AVE. KEY-LARGO PL 33037 KEY-LARGO FL-33037 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/25/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For W 56 STREET 2050 w 56 STREET 2050 65-0624199 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be FL Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Batista. Denis P Batista 416 LAGUNA AVE. 82 KEY-LARGO FL 33037 83 84 Statute, the above-named corporation submits this statement for the purpose of changing its registered was alithorized by the corporation's board of directors. I hereby accept the appointment as registered of providing statutes. Pursuant to the provisions of Sections 607.0502 and 607.1508, Flooffice or registered agent, or both, in the State of Florida. Such chagent. I am familiar with, and accept the obligations of, Section 6. Registered Agent signature required when reinstating) d soent and title if applicable 12, OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition TITLE 1.1 TITLE BATISTA, DENIS P 1.2 NAME NAME 416 LAGUNA AVE. STREET ADDRESS 1.3 STREET ADDRESS KEY LARGO FL 33037 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY+ST-ZIP DELETE Change Addition TITLE 61 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. Thereby 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 eath; 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