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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P95000082007

Principal Place of Business

DENIS INVESTMENT GROUP, INC.

STE 20 STE #20		HIALEAH FL 33016			DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed  10/25/1995		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied	d For	
21		26			65-0624199 Not Ap	plicable	
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired See Requir		
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 Mag Added to Fe		
Zip 24	Country 25	Zip 30	Country		8. This corporation owes the current year Intangible Personal Property Tax. Yes	No	
	9. Name and Address of Current	t Registered Agent			10. Name and Address of New Registered Agent		
D. T.	OTA DENIC D		81	Name			
2050	STA, DENIS P WEST 56TH ST		82	Street A	ddress (P.O. Box Number is Not Acceptable)	****	
STE			83			ł	
HIAL	EAH FL 33016		84	City	FL 85 Zip Code	9	
agent. I ai	m familiar with, and accept the obligat	t and title if applicable. (NOTE: Reg	Statutes	· 	ration's board of directors. I hereby accept the appointment as registruction and the appointment as registr		
12.	OFFICERS AN		13.			Addition	
TITLE	BYICE - PRESIDENT NEW A		1,1 TITLE				
NAME	BATISTA, DENIS P 418 LAGUNA AVE. 1466	I SW 35 STREET	1.2 NAME 1.3 STREET			}	
STREET ADDRESS	KEY LADOO FL-0007 #4 / A	UND EL 23/127		ĺ		Ì	
CITY-ST-ZIP	ALTERNATION IL SSUST PETAL	CO-TACL DELETE	1.4 CITY-8" 2.1 TITLE	1-2IP	· Change [	Addition	
TITLE NAME	KEY LARGO FL 33037 MIRA D, PRESIDENT/SEC MAYTHE GARCIA 14661 SW 35 ET	JETHEY -	2.2 NAME		الماء والمستقلاف المادان المتحملية والمادان المتحملية والمادان المتحملية والمادان المتحملية والمادان		
STREET ADDRESS	MANTHE GARCIA		23 STREET	ADDRESS		Ì	
CITY-ST-ZIP	MIRAMAR FL 33	02.7	2. 4 CITY-S	Î		Ĭ	
TITLE	7.77.64.4	☐ DELETE	3.1 TITLE		☐ Change [	Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS		ļ	
CITY-ST-ZIP			3.4. CITY-S	T-ZIP			
TITLE			4.1 TITLE		☐ Change	Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET			ļ	
CITY-ST-ZIP		☐ DELETE	4.4 CITY-S	T-ZIP	Change	Addition	
TITLE		Γ" ∩¢rειε	5.1 TITLE 5.2 NAME				
NAME			5.3 STREET	ADDRESS			
STREET ADDRESS			5.4 CITY-S			Į	
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change	Addition	
NAME		ے۔۔۔۔	6.2 NAME		_ ` `	ĺ	
STREET ADDRESS	16		63 STREET	ADORESS			

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, of or an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

**FILED** 

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90057 013 \*\*\*150.00