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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000090384 (5)

DANDY DECICAL INC

O. MANDT DESIGN, INC.				
Principal Place of Business	Mailing Address			
1320 S. Dixie Highavay Suite 700 Coral Gables Fl 33146	1320 S. DIXIE HIGHWAY SUITE 700 CORAL GABLES FL 33146			
2. Principal Place of Business	2s. Mailing Address			
Suite, Apt #, etc.	Suite, Apt. #, etc.			

FILED May 15 1998 8:00am Secretary of State

				···-		
Principal Place of Business Mailing Address						
1320 S. DIXIE HIGHWAY			DO NOT WRITE IN THIS SPACE			
CORAL GABLES FL 33146 CORAL GABLES FL 33146						
					 Date Incorporated or Qualified 11/21/1995 	
2. Principal Pl	ace of Business	2a. Mailing Address			4, FEI Number	Applied For
21		26			65-0639301	Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Counti	У	This corporation owes or has paid the or Porsonal Property Tax due June 30.	current year Intangibło
24	9. Name and Address of Curr				10. Name and Address of New Registere	
GO	RDON, LEWIS G ESQ.		8	Name		
132	20 S. DIXIE HIGHWAY ITE 700		8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)	
	RAL GABLES FL 33146		8:	3		
			84	1 City	F	85 Zip Code
office or re agent. I ar SIGNATURE	o the provisions of Sections 607.0 sgistered agent, or both, in the Sta or familiar with, and accept the obli-	ale of Florida, Such change w figations of, Section 607,0505	vas authorized t 5, Florida Statute	by the corpora	poration submits this statement for the purpose alion's board of directors. I hereby accept the approach when reinstaining) DATE	of changing its registered appointment as registered
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	D	☐ DEL€ TE	1.1 TITLE			Change Addition
NAME	STANO, CARL R		1.2 NAME			
STREET ADORESS	4718 S.W. 67 AVENUE		1.3 STREE	1 ADDRESS		
CITY-S1-ZIP	MIAMI FL 33155		14 CITY-	S1-2IP		
TITLE		☐ DETETE	2 1 TITLE			Change Addition
NAME]			2 2 NAME			
STREET ADDRESS			1	ET ADDRESS		
CITY-ST-ZIP TITLE		DELFTE	2 4 CITY 3.1 TITLE			Change Addition
NAME		L_J bicit	3.1 HILE 3.2 NAME	ľ		
1				1 ADDRESS		
STREET ADDRESS			3.4. CITY			
CITY - ST - ZIP		DELETE	4 1 TI7LE	- 31-211		Change Addition
NAME			4. 2 NAM	.		
STREET ADDRESS				T ADDRESS		
CITY-SI-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADORESS				T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	I		
TITLE		DELETE	6 1 TITLE			☐ Change ☐ Addition
NAME			6.2 NAME			1
STREET ADDRESS				T ADDRESS		
CITY CT 210			5.4.0ITV	CT 710		

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 suppliemental 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 Irustee 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.

Care R. Staus