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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

NT # **P96000020719 (6)**

DYLAF CORP

SIGNATURE:

	,0111					
Principal Place	of Business	Mailing Addre			***************************************	
330 BONNE TR		330 BONNE	330 BONNE TRAIL LONGWOOD FL 32750-2604			
						3. Date incorporated or Qualified 3a. Date of Last Report 03/04/1998
2. Principal Pla	2a. Maiting Ad	Mailing Address			4. FEI Number Applied For	
21		26				59 - 3 3 6 15 8 0 Not Applicable
Surte, Apt. # 22	I, etc	ļ,	Suite, Apt. #, etc.			5. Certificate of Status Desired See Required Fee Required
City & State	PPC 14 1 ALEXANDER		City & State			Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
<i>Z</i> īp	Country	Zip		Country	/	8. This corporation has liability for intangible tax under s. 199.032,
24	25	[29]		30		Florida Statutes Yes No
	9. Name and Address of Cu	irrent Hegistered Ager	n	81	Thlomo	10. Name and Address of New Registered Agent
	KUP, KEVIN			61		
	BONNIE TRAIL		82 Street Ad			ress (P.O. Box Number is Not Acceptable)
LOM	GWOOD FL 32750				<u> </u>	
				83		
				84	City	85 Zip Code
11. Pursuant to	the provisions of Sections 607	0502 and 607 1508 El	orida Statule	es the abou	e-named corr	poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE.		ed ag ont and fille 1 approable.		ん ちゅ Registered Ag 13.		ITO WHEN FEINSTAINING) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE			DELETE	1 1 THTLE	D,	ρ Change Addition
NAME				12 NAME	K	EVIN SOUKUP 30 BONNIE TRAIL
STREET ADORESS				1 3 STREE	r address 3	30 BONNIE TRAIL
CDY-ST ZIP			DCLETC	1.4 CITY - !	ST - Z4P	LONGWOOD, FL 32/50
TiTLE		لــا	DELETE	21 TITLE		Change Addition
NAME STREET ADORESS				2.2 NAME		
				2 3 STREE		
CITY-S1-ZiP TITLE			DELETE	2 4 CITY -	21.515	☐ Change ☐ Addition
NAME		_		3 2 NAME		- Change - Montour
STREET ADORESS				3 3 STREET	ADDRESS	
CHY-ST ZIP				3 4. CITY-	i	
DILE			DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS				4.3 STREET	ADDRESS	
CHY-ST-ZIF				4.4 CITY - 5	ST-ZIP	
THILE			DELETE	5.1 TITLE		Change Addition
NAME				5.2 NAME	•	
STREET ALIGNESS				5.3 STREET	ADDRESS	
CITY ST-ZIP			DELETE	5.4 CITY - S	ST - ZIP	
TITLE		L	DELETE	6.1 YITLE		L Change Addition
NAM!				6.2 NAME		
STREET ACORESS					ADDRESS	
City St-ZiP	vicertify that the information sur-	inlied with this filing doc	Aileun ton as	6.4 CITY-5	motion state	d in Section 119.07(3)(i), Florida Statutes. I further certify that the
information Lam an offi	⊨ndicated on this annual report	or supplemental annua on or the receiver or trus	al report is tr stee empowe	ue and acci ered to exec	urate and that	t my signature shall have the same legal effect as if made under oath; that rt as required by Chapter 607, Florida Statutes; and that my name