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

PROFIT CORPORATION ANNUAL REPORT

1998



Secretary of State DIVISION OF CORPORATIONS

P96000025163 (2)

FILED Apr 29 1998 8:00am Secretary of State

DAIN	renterphises, inc.					
Principal Plac	ce of Business	Mailing Addres	ss	•		I INCUIDAT IND INITED DIST DUST BUILT BUILT COLLE LIBET BISAT TIBLE DISER ESTI 1881
1428 W 49TH ST 9635 NW 8 STREET #315 HALEAH FL 33012 MIAMI FL 33126						
US						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 03/21/1996
2. Principal I	Place of Business	2a. Mailing Add	. Mailing Address			4. FEI Number Applied For
21		26				65-0653755 Not Applicab
Suite, Apt	#, etc.	Suite, Apt. #, etc.				Certificate of Status Desired \$8.75 Additional
22 Cau & Sto	10	City & State				Fee Hequired
City & Sta	10	├ ──				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country			Zip Country			This corporation owes or has paid the current year Intangible
24			29 30			Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre					10. Name and Address of New Registered Agent
	MENDOZA, ESPERANZA B			81	Name	
8635 NW 8 ST #315 MIAMI FL 33126				82	Street Add	dress (P.O. Box Number is Not Acceptable)
•	mrami FL 33160			83		
				Ш		
				84	City	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	Signature typed or printed name of registered as	ment and title if any limitable	INOTE: Beausti	erod Acor	nt signature regi	juired when reinstating) DATE
12.		ND DIRECTORS	I 1:		W Digital D To 4	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		DELETE 1.1	1 TITLE		☐ Change ☐ Addition
NAME	MENDOZA, ESPERANZA B	+	12	2 NAME		
STREET ADDRESS	8635 NW 8 ST #315		1.3	3 STREET A	ADDRESS	
CITY-ST-ZIP	MIAMI FL 33126		1.4	4 CITY-ST	- ZIP	
TITLE	VSD		DELETE 21	1 TITLE		Change Addition
NAME	MENDOZA, ESPERANZA B		2.2	2 NAME	İ	
STREET ADDRESS	8635 NW 8 STREET #315		2.3	3 STREET	ADDRESS	
CITY - ST - ZIP	MIAMI FL 33126		2.	4 CITY - S	T-ZIP	
TITLE		ı 🗀	DELETE 3.1	! TITLE		Change Addition
NAME				2 NAME		
STREET ADDRESS			3 3	STREET A	ADDRESS	
CITY - ST - ZIP		·····		1. CITY-S	T - ZIP	
TITLE	<u> </u>	LJ		TITLE	1	Change Addition
NAME				2 NAME		
STREET ADDRESS				3 STREET /		
CITY-ST-ZIP				I CITY-ST I TITLE	- ZIP	Change Addition
TITLE		L'		NAME		Change Auding
NAME PARCET ADDRESS			•		LDODGCC	
STREET ADDRESS	\		1	STREET A	1	
CITY-ST-ZIP TITLE				1 CITY-ST	- 201	Change Addition
NAME		، ب		NAME		E ourige
STREET ADDRESS				STREET /	ADDRESS	
CITY-ST-ZIP				CITY-ST		
OLLI STATIL	L		0.4	9 61111-31	- 4.IF	

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 suppliemental 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