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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600035566

1. Corporation Name

DANNE CONSULTING, INC.

FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90183 047 ***150.00



Principal Place of Business Mailing Address			ress			
6371 LA COSTA DR #105			6371 LA COSTA DR #105			
BOCA RATON FL 33433		BOCA RATON FL 33433				DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
,						
2. Principal Place of Business 2a. Mailing Address						04/24/1996 4. FEI Number Applied For
<u> </u>	lace of Busilless	<u></u>	2a. Mailing Address			
21		26				65-0661683 Not Applicable
Suite, Apt. #, etc.		<u> </u>	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required
22 City & Ct-t		27 City 8 C	City & State			
City & State		<u>}-</u> -¬ '	}- ¬ '			6. Election Campaign Financing \$5.00 May Be
23	Country 750					Trust Fund Contribution Added to Fees
Zip	Country	Zip				8. This corporation owes the current year Intangible
24	25	29	30	1		Personal Property Tax. Yes No
	9. Name and Address of Cu	rrent Registered Ag	ent	81	.	10. Name and Address of New Registered Agent
WOT	WOTHT DAME				Name	
WOTTITZ, DAVID F			82	Street	Address (P.O. Box Number is Not Acceptable)	
	LA COSTA DR #105		L			
BOC	A RATON FL 33433			83		
				04	C:t-	OF Tip Code
				84	City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, I	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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Р		DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WOTTITZ, DAVID F			1.2 NAME		
STREET ADDRESS			1.3 STREET	ADDRESS		
CITY-ST-ZiP	BOCA RATON FL			1.4 CITY-ST		
TITLE	VPS		DELETE	2.1 TITLE	- Z.IF	Change Addition
NAME	1110		2.2 NAME			
STREET ADDRESS			2.3 STREET	-		
CITY-ST-ZIP	BOCA RATON FL		DELETE	2.4 CITY-S	T-ZIP	☐ Change ☐ Addition
TITLE		Į.	T) DEFE 15	3.1 TITLE		Change ☐ Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET	ADDRESS	
CITY-ST-ZIP				34. CITY-S	T-Z I P	
TITLE		[DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME				4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS				
CITY-ST-ZIP				4.4 CITY-\$1	-ZIP	
TITLE			DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET	ADDRESS	
CITY-ST-ZIP				5.4 CITY-ST	-ZIP	
TITLE			DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		L		6.2 NAME		
				6.3 STREET	ANDRESS	
STREET ADDRESS					1	
CITY-ST-ZIP				6.4 CITY-ST	-ZIP	

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, or on an attacoment with an address, with all other like empowered.

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

G+13479997