

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 27, 1999 8:00 am
Secretary of State

07-27-1999 90030 038 ***150.00

DOCUMENT # P96000040570

1. Corporation Name

DLP HOLDINGS, INC.

Principal Place of Business

**800 BRICKELL AVE
SUITE 550
MIAMI FL 33131**

Mailing Address

**800 BRICKELL AVE
SUITE 550
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/06/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

4. FEI Number

65-0666390

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year
Intangible Personal Property.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**YANOWITCH, PETER J
800 BRICKELL AVE
SUITE 550
MIAMI FL 33131**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **DP** ☐ DELETE

NAME **CHAUVIER, DANNY**
STREET ADDRESS **2363 S OCEAN BLVD**
CITY-ST-ZIP **HIGHLAND BEACH FL 33487**

TITLE **DV** ☐ DELETE

NAME **VORBRICH, LARRY**
STREET ADDRESS **1130 FAIRFAX LANE**
CITY-ST-ZIP **WESTON FL 33326**

TITLE **DST** ☐ DELETE

NAME **YANOWITCH, PETER J**
STREET ADDRESS **800 BRICKELL AVE SUITE 550**
CITY-ST-ZIP **MIAMI FL 33131**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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 attachment with an address.

SIGNATURE

LARRY VORBRICH
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

P96000040570
596851-90030-38

DLP Holdings, Inc.

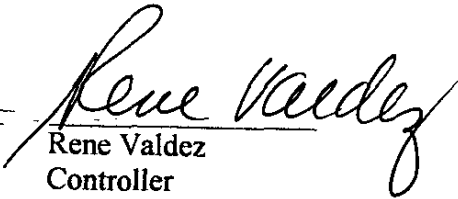
July 21, 1999

Florida Department State
Division of Corporation

Re: Document No. P96000040570

On April 6, 1999 we sent you our check no. 1160 (\$150.00) to pay for our annual report (see copy attached), however today we received a second notice. We contacted our bank and as of today this check has not been presented for payment. We are putting stop payment to our check no. 1160, and we are mailing you another check to pay for our annual report. Thank you.

Sincerely


Rene Valdez
Controller

P96000040570
596851-90030-38

Look for: blue background on the front of this check, and the imageSafe logo on back. If not present, do not cash.

DLP HOLDINGS LTD
403 SAWGRASS CORPORATE PKWY.
SUNRISE, FL 33325

1160

DATE

4/6/99

63-27/631 FL
90934

PAY
TO THE
ORDER OF

Department of State

\$ 150.-

One Hundred Fifty 00/100

DOLLARS



NationsBank

NationsBank, N.A.

ACH R/T 063100277

FOR

⑈001160⑈ ⑆063100277⑆ 003603983874⑈

2nd NOTICE
850 487 6059
apt 2
Annual Rept. Sect.
(Sent back to us for something
never received) ?