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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000051722 (2)

DLM ACCOUNTING SERVICES, INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 16 1997 8:00am Secretary of State



3702 SOUTHWEST 60 TERRACE, UNIT 31 DAVIE FL 33314		3702 SOUTHWEST 60 TERRACE, UNIT 31 DAVIE FL 33314-2530						
					3. Date Incorporated or Qualified 3a. Da 06/17/1996	te of Last	Report	
2. Principal Place of Business		26. Mailing Address			4. FEI Number 65 - 067938/	h+	Applied For	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.					Not Applicable  Additional	
22 City & State		27 Cily & State			5. Certificate of Status Desired	Fee Required		
23		28			6. Election Campaign Financing Trust Fund Contribution	8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Ziρ	Country	Zip	F7 ' F1''''			poration has liability for intangible tax under s. 199.032,		
25 9. Name and Address of Curren		29 rent Registered Agent			Florida Statutes Yes No  10. Name and Address of New Registered Agent			
AMI	ERILAWYER CHARTERED	The state of the s	81			gent	· <del></del>	
343 ALMERIA AVENUE				Street A	WRENCE LAURO ddress (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33134				370	22 SW 607H TERR			
			83	201	PVIE			
			84	City	FL	85 Zip	Code	
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statute	es, the above	l e-named (	corporation submits this statement for the purpose of	changing	33/4 its registered	
agent la	imfamiliar with, and accept the ob-	ate of Jorida. Such change was a ligations of, Section 607.0505, Flo	iuthorized by irida Statutes	the corp s.	corporation submits this statement for the purpose of oration's board of directors. I hereby accept the appointment of the control of the con	intment a	s registered	
SIGNATURE	ZIVYTUNN /	assis LAW	CONCE	LAU	eo 7/1/9	77		
72. T	OFFICERS A	IND DIRECTORS (NOTE	Registered Age	nt signature r	required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIDECTO	50 N 40	
TITLE	PTD	DELETE	1.1 TOLE			Change	Addition	
NAME	MYERS, DAGMAR L		1.2 NAME	1	•	_ •		
STREET ADDRESS	3702 SOUTHWEST 60 TERR	ACE, UNIT 31	1.3 STREET	ADDRESS				
CITY-ST-ZIP	DAVIE FL 33314 VSD	☐ DELETE	1.4 C(TY - S)	I - Z(P		<del></del>		
NAME	LAURO, LAWRENCE		2.1 TITLE 2.2 NAME	1		Change	Addition C	
STREET ADDRESS 3702 SOUTHWEST 60 TERRAC		ACE, UNIT 31	2.3 STREET	ADDRESS			ĺ	
CITY-ST-ZIP	DAVIE FL 33314		2. 4 CITY-S	T-ZIP				
TITLE		DELETE	3.1 TITLE			Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS CITY-ST-ZIP			3.3 STREET					
TITLE		DELETE	3.4. CITY - S 4.1 TITLE	1 - Z(P		Change	Addition	
NAME			4. 2 NAME		L-	,_ onange	C Addition	
STREET ADDRESS			4.3 STREET	ADDRESS	•			
CITY-ST-ZIP		Dr. Par	4 4 CITY - ST	- ZIP				
TITLE NAME		☐ DELETE	5.1 1011.6	-		Change	Addition	
STREET ADDRESS			5.2 NAME 5.3 STREET A	VUINBLEE	,			
CITY-ST-ZIP			5.4 CITY - ST					
TITLE		DELETE	6.1 7(TLE			Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET A	ADDRESS				
CITY-\$T-ZIP	v certify that the information supplied	od with this filing does not qualify	6.4 CITY-ST		tod in Control 140 02/0V/II Control III			

Information indicated on this annual report or supplied with rins little goves not quality 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.