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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9600052708 (0)

DANA TERMINAL JACKSONVILLE, INC.

Principal Place of Business DISCULLAN MENLIE EACT

Mailing Address

STON DESCRIPTION VENUE PACT

FILED Sep 23 1997 8:00am Secretary of State



| AVNEL NJ 077 | N VENUE ENSI | AVNEL NJ 07701 | | | | | | | | | |
|---|--|---|--------------------------------------|-------------------|---|--|--|---------------------------------------|-----------------------|--------------------------------|--|
| | | | | | | 3. Date Incorpo 06/20/1996 | rated or Qualified | 3a. Dat | e of Last | Report | |
| | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | . | X | Applied For | | |
| | Buckman Street | 26 210 Essex Ave. East | | | | | | | | tot Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of | Status Desired | | , | Additional | |
| City & State | <u> </u> | City & State | | | | | | | | Required | |
| | onville, FL | 28 Avenel, NJ | | | | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | |
| Zip | Country | Zip Country | | | | | ••••• | otopoible t | | | |
| 24 3220 | 2 25 | 29 07001 30 | | | 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes | | | | | | |
| | 9. Name and Address of Current | Registered Agent | | | | | ddress of New Reg | | | | |
| F&L | CORP. | | | 81 | Name | | | | | | |
| 200 | LAURA ST. | | | 82 | Street | Address (P.O. Box Numb | er is Not Accentabl | e) | | | |
| | KSONVILLE FL 32202 | | | - | | 1001000 (1.0. 00% (10)110 | or to Not Nocoptabl | , | | | |
| | | | | 83 | | | | | | | |
| | | | - | 84 | City | | | · · · · · · · · · · · · · · · · · · · | 85 Zip | Code | |
| | | | | | • | | | FL | | 1 | |
| 11. Pursuant i office or re agent. La | to the provisions of Sections 607.0502 egistered agent, or both, in the State or familiar with, and accept the obligat | and 607.1508, Florida Statute f Florida. Such change was a ions of, Section 607.0505, Flo | es, the ab uthorized rida Stat | ove by utes | -named the corp | corporation submits this paration's board of direct | statement for the poors. I hereby accep | urpose of o t the appo | changing intment a | its registered s registered | |
| SIGNATURE | Signature, typed or printed name of registered agent | and trie # anglicable (NOTE | Registered | Aner | nt signature | required when reinstating) | | DATE | | | |
| 12. | | OFFICERS AND DIRECTORS 13 | | | | | HANGES TO OFFICE | | DIRECTO | RS IN 12 | |
| TITLE | D | DELETE | 1.1 117 | LE | | | | 1 | Change | Addition | |
| NAME | DANA, RONALD | | 1.2 NA | ME | | | | | | | |
| STREET ADDRESS | 2700 BUCKHAM STREET | | 1.3 STREET ADDRESS | | ADDRESS | Condominio Apt.1201 | Marbella | Del | Cari | be | |
| CITY-ST-ZIP | JACKSONVILLE FL 32206 | | 1.4 CITY- | | - 2 IP | Apt.1201 Islaverde P | nerto Rio | ~o 00 | 903 | | |
| TITLE | | ☐ DELETE | 2.1 111 | LE | | | | 7 | Change | Addition | |
| NAME | | | 2.2 NAME | | | | | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 2.4 CITY-ST-ZIP | | I-ZIP | | | | | | |
| TITLE | | | | 3.1 TITLE | | | | L | Change | Addition | |
| NAME | | | 3.2 NA | | | | | | | 1 | |
| STREET ADORESS | | | | | ADDRESS | | | | | | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CI 4.1 TIT | | I - ZIP | | | | Change | Addition | |
| NAME | | L. Detect | 4.7 H | | İ | | | ι | Change | L. Addition | |
| STREET ADDRESS | | | | | ADDRESS | 7 | | | | ŀ | |
| CITY-ST-ZIP | | | | | | ÷ | | | | | |
| TITLE | | DELETE | 4.4 CH | | -20 | | | | Change | Addition | |
| NAME | | | 5 2 NA | | l | | | | Ununge | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 5 4 01 | | | | | | | | |
| TITLE | | DELETE | 6.1 TIT | | F.11 | | | I | Change | Addition | |
| NAME | | | 6.2 NA | | | | | _ | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 6.4 CIT | Y-ST | - ZIP | | | | | | |
| | by certify that the information supplied | with this filing does not qualify | for the | exen | nption st | ated in Section 119.07(3 | (i), Florida Statutes | . I further d | ertify tha | t the | |

val 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 proportion or the receiver or trusce empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name changed, of on an attachment with an address.