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

PROFIT CORPORATION ANNUAL REPORT

City & State

23

24

Zip

City - ST - ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000057408 (2)

DESIGN MANAGEMENT ASSOCIATES INC.

Country

HARLING, HARVEY H 6100 GLADES ROAD

BOCA RATON FL 33434

SUITE 201

g. Name and Address of Current Registered Agent

Principal Place of Business	Mailing Address	t tobbiend in tolin biel neile beili beili delli delli delli setti bibli debib i delli		
12466 SAWGRASS COURT WELLINGTON FL 33414	12468 SAWGRASS COURT WELLINGTON FL 33414-4823			
		3. Date Incorporated or Qualified 07/05/1996	3a. Date of Last Report	
2. Principal Place of Business	2a. Mailing Address	4, FEI Number	Applied Fo	
21	26		Not Applic	
Suite, Apt. #, etc	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Addition Fee Regulred	

City & State

Zip

Country

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84 City

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office or r	to the provisions of Sections 607,0502 and 607,1506 egistered agent, or both, in the State of Florida. Suc m familiar with, and accept the obligations of, Section	h change was aut	thorized by the corp	corporation submits this statement for the poration's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE	Standard, tysical or printed native of represented agent and lefe if applicat	ole (NOTE F	Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
TITLE	DP	DELETE	1.1 TIFLE		Change Addition
NAME	GOLDMAN, VICTORIA J		1.2 NAME		
STREET ADDRESS	12466 SAWGRASS COURT		1.3 STREET ADDRESS		
CITY-S1-ZiP	WELLINGTON FL 33414		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2. 4 City-St-Zip		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
City-St-Zip			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY-ST-7IP			4.4 CITY - ST - ZIP		$1 \wedge 1 \rightarrow 1$
THE		DELETE	5.1 TITLE		/Change / Addition
NAME			5.2 NAME		/1/2 1/100/
STREET ADDRESS			5.3 STREET ADDRESS		4//1 4/) 59
CITY - S1 - ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			62 NAME ***	30000215 -04/25/97010	つ 什 f f ご)07022
STREET ADDRESS			6.3 STREET ADDRESS		101021
CITY OF 210			6 4 CITY - CT - 7ID	***173.75	

6.4 CITY - ST-ZIP 14. I do 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 path; 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.

VICTORIA J. GOLMAN 4/15/97 SIGNATURE:

FILED

Apr 23 1997 8:00am

Secretary of State

8. This corporation has liability for intangible tax under s. 199.032, ☑ Yes

10. Name and Address of New Registered Agent

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

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

Applied For Not Applicable \$8.75 Additional

\$5.00 May Be

Added to Fees

Zip Code