

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

FILED

Apr 15 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P96000061363 (3)**

1. Corporation Name

**DG ASSOCIATES, INC.**



Principal Place of Business

**2111 NW 62 DRIVE  
BOCA RATON FL 33496**

Mailing Address

**2111 NW 62 DRIVE  
BOCA RATON FL 33496-2656**

3. Date Incorporated or Qualified

**07/23/1986**

3a. Date of Last Report

2. Principal Place of Business

**21 3067 Jay Road**

2a. Mailing Address

**26 3067 Jay Road**

4. FEI Number

**65-0683091**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes

☒ No

City & State

**23 Greenacres, FL**

City & State

**28 Greenacres, FL**

Zip

**24 33463**

Country

Zip

**29 33463**

Country

**30**

9. Name and Address of Current Registered Agent

**GOLDWASSER, NEIL  
2111 NW 62 DRIVE  
BOCA RATON FL 33496**

10. Name and Address of New Registered Agent

**81 Name Daniel Goldwasser**  
**82 Street Address (P.O. Box Number is Not Acceptable) 3067 Jay Road**  
**83**  
**84 City Greenacres FL**  
**85 Zip Code 33463**

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

**Daniel Goldwasser**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**4/6/97**

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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CITY - ST - ZIP

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NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☒ Addition

1.1 TITLE

**President**

1.2 NAME

**Daniel Goldwasser**

1.3 STREET ADDRESS

**9721 Arbor Oaks Lane Apt 204**

1.4 CITY - ST - ZIP

**Boca Raton, FL 33428**

2.1 TITLE

**Vice President**

2.2 NAME

**Neil Goldwasser**

2.3 STREET ADDRESS

**2111 N.W. 62 Drive**

2.4 CITY - ST - ZIP

**Boca Raton, FL 33496**

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 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:

**Daniel Goldwasser** **4/6/97** **(561) 963-0709**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

0340052

CR2E034 (9/96)